No. C 65930	Due no later than February 28, 2005 Annual Report Form	2. Registered Agent and Office NO PO BOX
Return to:	Mailing Address - Correct in this box, if applicable	KATHERINE M OLSEN
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	SELKIRK SHADOWS, INC. MERLE E OLSEN ROUTE 4, BOX 606 BONNERS FERRY, ID 83805	COUNTY ROAD #2, MORAVIA BONNERS FERRY, ID 83805
NO FILING FEE IF	BONNERO I ERRY, 18 00003	3. New Registered Agent Signature
RECEIVED BY DUE DATE		
4. Corporations: Enter Nan	nes and Business Addresses of President, Secreta	ny and Directors
Office held Name	Street or P.O. Address City	-
Office field Ivaline	direct of F.O. Address	<u>State</u> <u>Lip</u>
MES. MERCE O.	LSEN RT4, BOX 606 BONNE	AS FERRY 10 83805
C. U.	LSEN RT4, BOX GOL BONNE	3 12KKY 10 83825
SEC. KATHERINE	OLSEV	11
5. Organized Under the Laws of:	6. D. h 00	/
IDAHO	Signature K. Th. Charm Name (Typed of KATAERIN'S OLS)	Date 1-20-05 EN Title SEC.
C 65930	(Typed of Klathe Don's Dea	500
3 00000	Name Printed ATTERINE CAS	Title JEC
Issued 12/01/2004	Do Not Tape or Staple	200502005013