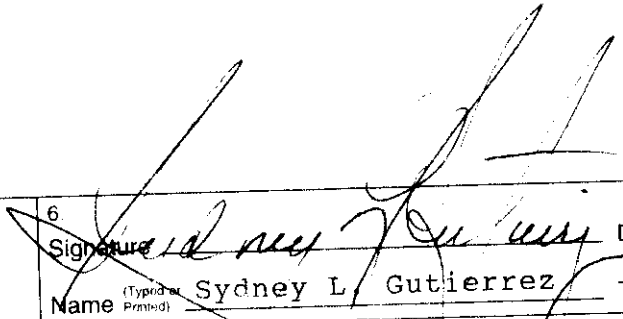
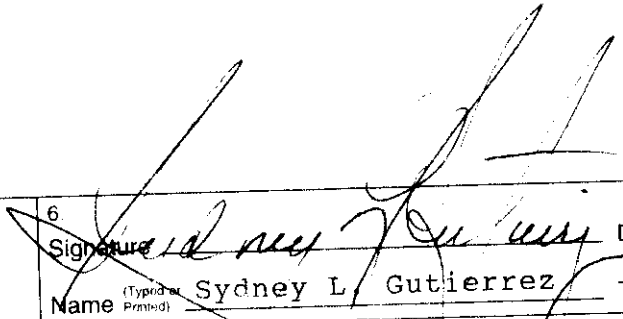
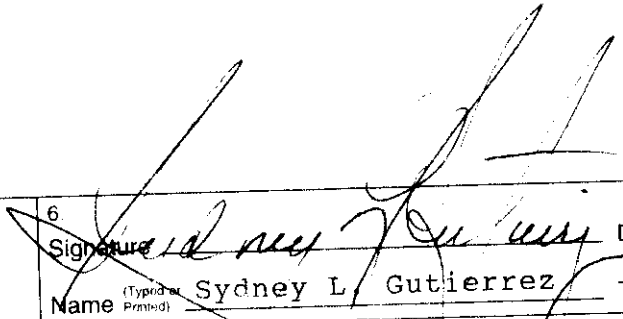


No. <b>W 31593</b>	<b>Due no later than June 30, 2005</b> <b>Annual Report Form</b>		2. Registered Agent and Office <b>NO PO BOX</b>																		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF          RECEIVED BY DUE DATE</b>	<b>1. Mailing Address - Correct in this box, if applicable</b>  SAGLE MOBILE HOME SERVICE, LLC PO BOX 2028 SANDPOINT, ID 83864		SYDNEY L GUTIERREZ 317 CHURCH ST SANDPOINT, ID 83864  3. <u>New</u> Registered Agent Signature																		
<b>4. Limited Liability Companies: Enter Names and Addresses of Members.</b> <table border="1"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>Manager</td> <td>Patrick N. Ferrick,</td> <td>P.O. Box 199,</td> <td>Sagle,</td> <td>ID</td> <td>83860</td> </tr> <tr> <td>Member</td> <td>Michael D. Moiles,</td> <td>111 Gun Club Rd., #11,</td> <td>Sagle,</td> <td>ID</td> <td>83860</td> </tr> </tbody> </table>				<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	Manager	Patrick N. Ferrick,	P.O. Box 199,	Sagle,	ID	83860	Member	Michael D. Moiles,	111 Gun Club Rd., #11,	Sagle,	ID	83860
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