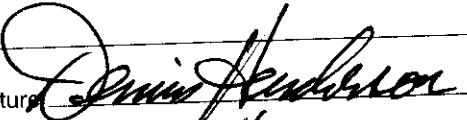


No. W 10716	Due no later than January 31, 2004 Annual Report Form		2. Registered Agent and Office NO PO BOX DENNIS HENDERSON 1300 KIMBERLY RD #5 TWIN FALLS, ID 83301																		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable ADVANTAGE PLUS APPRAISALS, L.L.C. 1300 KIMBERLY RD #5 TWIN FALLS, ID 83301		3. <u>New</u> Registered Agent Signature																		
4. Limited Liability Companies: Enter Names and Addresses of Members. <table style="width: 100%; margin-top: 10px;"> <thead> <tr> <th style="text-align: center;"><u>Office held</u></th> <th style="text-align: center;"><u>Name</u></th> <th style="text-align: center;"><u>Street or P.O. Address</u></th> <th style="text-align: center;"><u>City</u></th> <th style="text-align: center;"><u>State</u></th> <th style="text-align: center;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">MEMBER</td> <td>DENNIS HENDERSON</td> <td>2242 HILLCAST DR.</td> <td>TWIN FALLS</td> <td>ID</td> <td>83301</td> </tr> <tr> <td style="text-align: center;">MEMBER</td> <td>MARY HENDERSON</td> <td style="text-align: center;">"</td> <td style="text-align: center;">"</td> <td style="text-align: center;">"</td> <td style="text-align: center;">"</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>	MEMBER	DENNIS HENDERSON	2242 HILLCAST DR.	TWIN FALLS	ID	83301	MEMBER	MARY HENDERSON	"	"	"	"
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>																
MEMBER	DENNIS HENDERSON	2242 HILLCAST DR.	TWIN FALLS	ID	83301																
MEMBER	MARY HENDERSON	"	"	"	"																
5. Organized Under the Laws of: IDAHO W 10716		6.  Signature _____ Date <u>2/12/04</u> Name (Typed or Printed) <u>DENNIS HENDERSON</u> Title <u>OWNER</u>																			