

No. W 4568	Due no later than Aug 31, 2001 Annual Report Form		2. Registered Agent and Office NO PO BOX												
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	JERRY L LOOSLI 1490 E 12TH S	MOUNTAIN HOME, ID 83647 3. <u>New</u> Registered Agent Signature												
	LOOSLI'S QUALITY AUTOMOTIVE REPAIR, 1490 E 12TH S MOUNTAIN HOME, ID 83647														
4. Limited Liability Companies: Enter Names and Addresses of Members. <table border="1" data-bbox="314 391 1791 474"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>OWNER</td> <td>Jerry L. Loosli</td> <td>1490 E 12th So.</td> <td>mtn home</td> <td>ID</td> <td>83647</td> </tr> </tbody> </table>				Office held	Name	Street or P.O. Address	City	State	Zip	OWNER	Jerry L. Loosli	1490 E 12 th So.	mtn home	ID	83647
Office held	Name	Street or P.O. Address	City	State	Zip										
OWNER	Jerry L. Loosli	1490 E 12 th So.	mtn home	ID	83647										
5. Organized Under the Laws of: IDAHO W 4568	6. Signature <u><i>Sally Loosli</i></u> Name (Typed or Printed) <u>SALLY LOOSLI</u>		Date <u>7/23/01</u> Title <u>BKPR</u>												