

No. W 4180	Due no later than Jun 30, 2003 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		PETER SCHOTT 1991 CREEKSIDE LN BOISE, ID 83706																			
	ROCK CITY, L.L.C. PETER SCHOTT PO BOX 738 BOISE, ID 83701																					
4. Limited Liability Companies: Enter Names and Addresses of Members. <table border="1"> <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>MEMBER</td> <td>Peter Schott</td> <td>1991 CREEKSIDE LANE</td> <td>BOISE</td> <td>IDH.</td> <td>83706</td> </tr> <tr> <td>MEMBER</td> <td>Emily A. Schott</td> <td>1991 CREEKSIDE LANE</td> <td>BOISE</td> <td>IDH.</td> <td>83706</td> </tr> </tbody> </table>					Office held	Name	Street or P.O. Address	City	State	Zip	MEMBER	Peter Schott	1991 CREEKSIDE LANE	BOISE	IDH.	83706	MEMBER	Emily A. Schott	1991 CREEKSIDE LANE	BOISE	IDH.	83706
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5. Organized Under the Laws of: IDAHO W 4180		6. Signature <u>Peter Schott</u> Date <u>7/1/03</u> Name (Type or Printed) <u>PETER SCHOTT</u> Title <u>MEMBER</u>																				

Issued 07/07/2003

Do Not Tape or Staple