

No. W 16191	Due no later than August 31, 2004 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 TR3, L L C. 840 WINDROW CIR IDAHO FALLS, ID 83404		LAURIE B GAFFNEY 2105 CORONADO IDAHO FALLS, ID 83404 3. <u>New</u> Registered Agent Signature												
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>Wesley T Beard</td> <td>840 Windrow Circle</td> <td>Idaho Falls</td> <td>ID</td> <td>83404</td> </tr> </tbody> </table>				Office held	Name	Street or P.O. Address	City	State	Zip	Member	Wesley T Beard	840 Windrow Circle	Idaho Falls	ID	83404
Office held	Name	Street or P.O. Address	City	State	Zip										
Member	Wesley T Beard	840 Windrow Circle	Idaho Falls	ID	83404										
5. Organized Under the Laws of: IDAHO W 16191	6. Signature <u>Wesley T Beard</u> Name (Typed or Printed) <u>Wesley T Beard</u>			Date <u>6-23-04</u> Title <u>Member</u>											