

No. <b>W 15867</b>	<b>Due no later than Jul 31, 2002 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>	1. Mailing Address - Correct in this box, if applicable  PAUL TITUS, L.L.C.  3620 COVINGTON  POST FALLS, ID 83854		JOE T CORNELL 3620 COVINGTON  POST FALLS, ID 83854																	
			3. <u>New</u> Registered Agent Signature																	
	4. Limited Liability Companies: Enter Names and Addresses of Managers.  <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>Managing member</td> <td>Joe T. Cornell</td> <td>3620 E. Covington Ave,</td> <td>Post Falls</td> <td>ID</td> <td>83854</td> </tr> <tr> <td>member</td> <td>Mike P. Leach</td> <td>3620 E. Covington Ave,</td> <td>Post Falls</td> <td>ID</td> <td>83854</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>	Managing member	Joe T. Cornell	3620 E. Covington Ave,	Post Falls	ID	83854	member	Mike P. Leach	3620 E. Covington Ave,	Post Falls	ID
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5. Organized Under the Laws of:  IDAHO W 15867	6. Signature <sup>x</sup> Date <sup>x</sup> Name (Typed or Printed) <u>Joe T. Cornell</u> Title <u>Mng. Mbr.</u>																			

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Do Not Tape or Staple

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