No. C 54066 Return to:		Due no later than August 31, 2005  Annual Report Form		Registered Agent and Office NO PO BOX     DENNIS L ALBERS	
NO FILING FEE IF				New Registered Agent Signature	
RECEIVED BY D			į		
<ol> <li>Corporation</li> </ol>	s: Enter Nam	nes and Business Addresses of Pr	esident, Secretary a	nd Directors	
	Name	Street or P.O Address	City	State	<u>Zip</u>
PRESIDENT	J. PAUL E	IMERS 644 DAWN DRIVE	GRANGEVI	LLE ID	83530
SECRETARY KATHLEEN A.		A. EIMERS 644 DAWN DRIVE	GRANGEVI	LLE ID	83530
DIRECTOR	JAKE EIMER	RS 620 MAPLE	GRANGEVI	LLE ID	83530
5. Organized Under t IDAI C 54	НО	6. Signature  Name (types or J. PAUL)	EIMERS	Date	- 22-65
Issued 06/01/2005		Do Not Tape or S	Staple	200508003623	