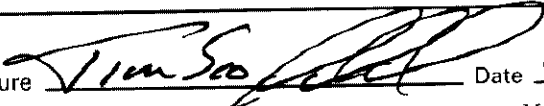


No. W 5400	Annual Report Form 1999 <i>Due No Later Than November 30,</i>		2. Registered Agent and Office NOT A P.O. BOX
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED * FIRST NOTICE *	1. Mailing Address - Please Correct, If Not Correct		TIM SCOFIELD 322 KIENHOLZ DR HOPE ID 83836
	GROENKE LLC TIM SCOFIELD 322 KIENHOLZ DR HOPE ID 83836		3. Organized Under the Laws of: ID W 5400
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one)			
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u> <u>State</u> <u>Zip</u>
Manager	Klaus Groenke	1 Kienholz Drive	Hope, Idaho 83836
Member	Tim Scofield	2 Kienholz Drive	Hope, Idaho 83836
5. Signature of New Registered Agent		6. Signature  Date <u>8/4/99</u> Name (Typed or Printed) <u>Tim Scofield</u> Title <u>Member</u>	

ISSUED: 07-03-1999

6310