

<b>No. C 65554</b>	<b>Due no later than Dec 31, 2002 Annual Report Form</b>	<b>2. Registered Agent and Office NO PO BOX</b>																								
<b>Return to:</b> SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>1. Mailing Address</b> <small>Correct in this box, if applicable</small>  DON RILEY FURNITURE, INC. LANI RYAN PERKINS 7293 W AIRWAY CT STE D  BOISE, ID 83709	LANI PERKINS 7293 W AIRWAY CT STE D  BOISE, ID 83709  <b>3. New Registered Agent Signature</b>																								
<b>4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.</b> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center;"><u>Office held</u></th> <th style="text-align: center;"><u>Name</u></th> <th style="text-align: center;"><u>Street or P.O. Address</u></th> <th style="text-align: center;"><u>City</u></th> <th style="text-align: center;"><u>State</u></th> <th style="text-align: center;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">President</td> <td>Lani Perkins</td> <td>7293 W Airway Ct Ste D</td> <td>Boise</td> <td>ID</td> <td>83709</td> </tr> <tr> <td style="text-align: center;">Vice President</td> <td>Tom Perkins</td> <td>12685 N. Schicks Ridge Rd</td> <td>Boise</td> <td>ID</td> <td>83703</td> </tr> <tr> <td style="text-align: center;">Sec/Treas.</td> <td>Scott Morris</td> <td>10506 Sage Hollow way</td> <td>Boise</td> <td>ID</td> <td>83703</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>	President	Lani Perkins	7293 W Airway Ct Ste D	Boise	ID	83709	Vice President	Tom Perkins	12685 N. Schicks Ridge Rd	Boise	ID	83703	Sec/Treas.	Scott Morris	10506 Sage Hollow way	Boise	ID	83703
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<b>5. Organized Under the Laws of:</b>  IDAHO C 65554	<b>6.</b> Signature <u><i>Scott W. Morris</i></u> Date <u>11/13/2002</u> Name <small>(Typed or Printed)</small> <u>Scott W. Morris</u> Title _____																									