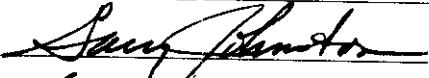


No. W 18637 Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	Due no later than March 31, 2004 Annual Report Form 1. Mailing Address - Correct in this box, if applicable: EAGLE CAP HOMES L.L.C. PO BOX 220 STAR, ID 83669	2. Registered Agent and Office NO PO BOX GARY JOHNSTON 3285 BUCKBOARD WAY BOISE, ID 83713 3. <u>New</u> Registered Agent Signature												
4. Limited Liability Companies: Enter Names and Addresses of Managers. <table style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th style="text-align: left; width: 15%;"><u>Office held</u></th> <th style="text-align: left; width: 25%;"><u>Name</u></th> <th style="text-align: left; width: 35%;"><u>Street or P.O. Address</u></th> <th style="text-align: left; width: 15%;"><u>City</u></th> <th style="text-align: left; width: 10%;"><u>State</u></th> <th style="text-align: left; width: 10%;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td style="vertical-align: top;">MANAGING Member</td> <td style="vertical-align: top;">GARY JOHNSTON</td> <td style="vertical-align: top;">PO BOX 220</td> <td style="vertical-align: top;">STAR</td> <td style="vertical-align: top;">ID</td> <td style="vertical-align: top;">83669</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	GARY JOHNSTON	PO BOX 220	STAR	ID	83669
<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	GARY JOHNSTON	PO BOX 220	STAR	ID	83669									
5. Organized Under the Laws of: <div style="text-align: center;">IDAHO W 18637</div>	6. Signature <u></u> Date <u>1-10-2004</u> Name <small>(Type or Printed)</small> <u>GARY JOHNSTON</u> Title <u>MAN. Member</u>													

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