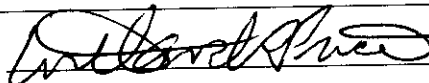


No. W 12378	Due no later than Jul 31, 2002 Annual Report Form	2. Registered Agent and Office NO PO BOX																		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable WORKING PERFORMANCE CO., LLC 697 E 1600 N IDAHO FALLS, ID 83402	WILLARD R PRICE 697 E 1600 N IDAHO FALLS, ID 83402 3. New Registered Agent Signature																		
4. Limited Liability Companies: Enter Names and Addresses of Managers. <table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>MANAGER</td> <td>WILLARD R PRICE</td> <td>697 E 1600 N</td> <td>IDA FALLS</td> <td>ID</td> <td>83402</td> </tr> <tr> <td>MEMBER</td> <td>CONA R PRICE</td> <td>697 E 1600 N</td> <td>IDA FALLS</td> <td>ID</td> <td>83402</td> </tr> </tbody> </table>			Office held	Name	Street or P.O. Address	City	State	Zip	MANAGER	WILLARD R PRICE	697 E 1600 N	IDA FALLS	ID	83402	MEMBER	CONA R PRICE	697 E 1600 N	IDA FALLS	ID	83402
Office held	Name	Street or P.O. Address	City	State	Zip															
MANAGER	WILLARD R PRICE	697 E 1600 N	IDA FALLS	ID	83402															
MEMBER	CONA R PRICE	697 E 1600 N	IDA FALLS	ID	83402															
5. Organized Under the Laws of: IDAHO W 12378	6. Signature  Date <u>6.27.02</u> Name (Typed or Printed) <u>WILLARD R PRICE</u> Title <u>MANAGER</u> <u>MEMBER</u>																			