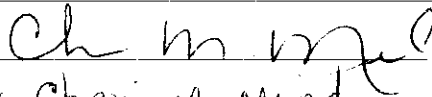
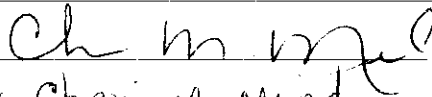
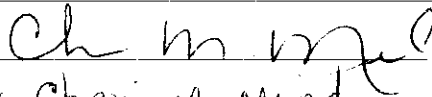


No. W 26086	Due no later than September 30, 2004 Annual Report Form	2. Registered Agent and Office NO PO BOX												
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	<div style="background-color: black; color: white; text-align: center; padding: 2px;">1. Mailing Address - Correct in this box, if applicable</div> ISLAND PARK DEVELOPMENT L.L.C. PO BOX 256 ISLAND PARK, ID 83429	CHERI MUND 3506 TIMBER HEIGHTS RD ISLAND PARK, ID 83429 3. <u>New</u> Registered Agent Signature												
4. Limited Liability Companies: Enter Names and Addresses of Members. <table style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px solid black;">Office held</th> <th style="text-align: left; border-bottom: 1px solid black;">Name</th> <th style="text-align: left; border-bottom: 1px solid black;">Street or P.O. Address</th> <th style="text-align: left; border-bottom: 1px solid black;">City</th> <th style="text-align: left; border-bottom: 1px solid black;">State</th> <th style="text-align: left; border-bottom: 1px solid black;">Zip</th> </tr> </thead> <tbody> <tr> <td style="vertical-align: top;">member manager</td> <td style="vertical-align: top;">Cheri Mund</td> <td style="vertical-align: top;">PO Box 256</td> <td style="vertical-align: top;">Island Park</td> <td style="vertical-align: top;">Idaho</td> <td style="vertical-align: top;">83429</td> </tr> </tbody> </table>			Office held	Name	Street or P.O. Address	City	State	Zip	member manager	Cheri Mund	PO Box 256	Island Park	Idaho	83429
Office held	Name	Street or P.O. Address	City	State	Zip									
member manager	Cheri Mund	PO Box 256	Island Park	Idaho	83429									
5. Organized Under the Laws of: <div style="text-align: center;">IDAHO W 26086</div>	6. <table style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <tr> <td style="width: 60%;">Signature </td> <td style="width: 40%;">Date <u>7-13-04</u></td> </tr> <tr> <td>Name <small>(Typed or Printed)</small> <u>Cheri M. Mund</u></td> <td>Title <u>pres</u></td> </tr> </table>		Signature 	Date <u>7-13-04</u>	Name <small>(Typed or Printed)</small> <u>Cheri M. Mund</u>	Title <u>pres</u>								
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