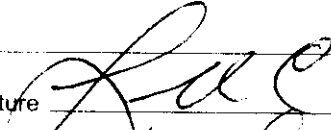


<b>No. W 5035</b>	<b>Due no later than November 30, 2004</b> <b>Annual Report Form</b>		2. Registered Agent and Office <b>NO PO BOX</b>												
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF          RECEIVED BY DUE DATE</b>	1. Mailing Address - Correct in this box, if applicable  CASCADE APARTMENTS LLC ALLEN LEE CENTERS PO BOX 518 MERIDIAN, ID 83680		ALLEN LEE CENTERS 3770 S LINDER MERIDIAN, ID 83642  3. <u>New</u> 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>President</td> <td>Lee Centers</td> <td>PO BOX 518</td> <td>Meridian</td> <td>ID</td> <td>83680</td> </tr> </tbody> </table>				Office held	Name	Street or P.O. Address	City	State	Zip	President	Lee Centers	PO BOX 518	Meridian	ID	83680
Office held	Name	Street or P.O. Address	City	State	Zip										
President	Lee Centers	PO BOX 518	Meridian	ID	83680										
5. Organized Under the Laws of:  IDAHO W 5035	6. Signature  Name <small>(Type or Print)</small> Lee Centers Date 9/10/04 Title President														