

No. W 8047	Due no later than Feb 28, 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 NORTHWEST TREE SUPPLIERS LLC PO BOX 1 HAMMETT, ID 83627 0001	CARL RIPPE PO BOX 1 HAMMETT, ID 83627 0001 3. <u>New</u> Registered Agent Signature											
4. Limited Liability Companies: Enter Names and Addresses of Managers. <table border="0" style="width: 100%;"> <tr> <td style="text-align: center;"><u>Office held</u></td> <td style="text-align: center;"><u>Name</u></td> <td style="text-align: center;"><u>Street or P.O. Address</u></td> <td style="text-align: center;"><u>City</u></td> <td style="text-align: center;"><u>State</u></td> <td style="text-align: center;"><u>Zip</u></td> </tr> <tr> <td></td> <td>Manager Carl Rippe</td> <td>PO Box 1</td> <td>Hammett,</td> <td>ID</td> <td>83627</td> </tr> </table>			<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>		Manager Carl Rippe	PO Box 1	Hammett,	ID	83627
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>									
	Manager Carl Rippe	PO Box 1	Hammett,	ID	83627									
5. Organized Under the Laws of: IDAHO W 8047	6. Signature <u>Elizabeth S. Rippe</u> Date <u>2-28-02</u> Name (Typed or Printed) <u>Elizabeth S. Rippe</u> Title _____													