	Due no later than Sep 30, 2001	
Return to:	Annual Report Form	Registered Agent and Office NO PO BOX
SECRETARY OF STATE	1. Mailing Address - Correct in this box, if applicable	CHRIS PARK 502 W CEDAR
700 WEST JEFFERSON PO BOX 83720	CHRIS PARK	302 W CEDAR
BOISE, ID 83720-0080	502 W CEDAR	SANDPOINT, ID 83864
NO FILING FEE IF	SANDPOINT, ID 83864	New Registered Agent Signature
RECEIVED BY DUE DATE		1 - 100 Report Signature
4. Limited Liability Comp	anies: Enter Names and Addresses of Members.	
Office held Name	Street or P.O. Address	
member 11	1 O 1	ity <u>State</u> <u>Zip</u>
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5. Organized Under the Laws of:	6. NY Y 2 O	
5. Organized Under the Laws of: IDAHO	6. Signature Mistoph 3. Por	7/10/
5. Organized Under the Laws of:	Signature MSph X	1 Date 7/10/01
5. Organized Under the Laws of: IDAHO		1 Date 7/10/01