


<b>No. W 3277</b>	<b>Due no later than Dec 31, 2002</b> <b>Annual Report Form</b>	2. Registered Agent and Office <b>NO PO BOX</b> ILENE G OLSEN 333 SHOSHONE AVE REXBURG, ID 83440												
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 NORTHTOWN VILLAGE APARTMENTS, L.L.C ILENE G OLSEN PO BOX 583 REXBURG, ID 83440	3. <u>New</u> Registered Agent Signature												
4. Limited Liability Companies: Enter Names and Addresses of Managers. <table style="width: 100%; border: none;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px solid black;"><u>Office held</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>Name</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>Street or P.O. Address</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>City</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>State</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>Manager</td> <td>Ilene G. Olsen</td> <td>P.O. Box 583</td> <td>Rexburg</td> <td>Id</td> <td>83440</td> </tr> </tbody> </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	Ilene G. Olsen	P.O. Box 583	Rexburg	Id	83440
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>									
Manager	Ilene G. Olsen	P.O. Box 583	Rexburg	Id	83440									
5. Organized Under the Laws of:  IDAHO W 3277	6. Signature <u></u> Date <u>12-12-02</u> Name <small>(Typed or Printed)</small> <u>Ilene G. Olsen</u> Title <u>Manager</u>													