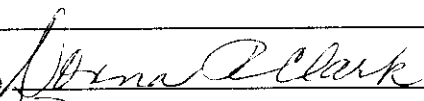
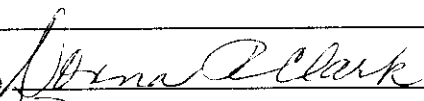
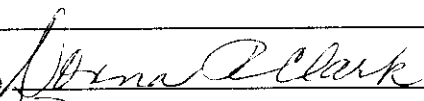


No. W 31637	Due no later than July 31, 2006 Annual Report Form	2. Registered Agent and Office NO PO BOX DENNIS L CLARK 643 RIVERVIEW DR TWIN FALLS, ID 83301																		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable EXIT LLC 643 RIVERVIEW DR TWIN FALLS, ID 83301	3. <u>New</u> Registered Agent Signature																		
4. Limited Liability Companies: Enter Names and Addresses of Managers. <table style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th style="text-align: left; width: 10%;"><u>Office held</u></th> <th style="text-align: left; width: 20%;"><u>Name</u></th> <th style="text-align: left; width: 40%;"><u>Street or P.O. Address</u></th> <th style="text-align: left; width: 10%;"><u>City</u></th> <th style="text-align: left; width: 10%;"><u>State</u></th> <th style="text-align: left; width: 10%;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>MANAGER</td> <td>DENNIS L. CLARK</td> <td>643 RIVERVIEW DR.</td> <td>TWIN FALLS</td> <td>ID</td> <td>83301</td> </tr> <tr> <td>MANAGER</td> <td>DONNA R. CLARK</td> <td>643 RIVERVIEW DR</td> <td>TWIN FALLS</td> <td>ID</td> <td>83301</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	DENNIS L. CLARK	643 RIVERVIEW DR.	TWIN FALLS	ID	83301	MANAGER	DONNA R. CLARK	643 RIVERVIEW DR	TWIN FALLS	ID	83301
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5. Organized Under the Laws of: IDAHO W 31637	6. <table style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <tr> <td style="width: 60%;">Signature </td> <td style="width: 40%;">Date <u>5-10-06</u></td> </tr> <tr> <td>Name (Typed or Printed) <u>DONNA R. CLARK</u></td> <td>Title <u>MANAGER</u></td> </tr> </table>		Signature 	Date <u>5-10-06</u>	Name (Typed or Printed) <u>DONNA R. CLARK</u>	Title <u>MANAGER</u>														
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