

No. <u>W 19213</u>	Expires <u>May 31, 2003</u> Annual Report Form		2. Registered Agent and Office NO PO BOX												
Return to: <u>W 19213</u> 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 <u>JON GRAVESTOCK</u> <u>1688 SHEPHERD RD</u> <u>SAINT MARIES, ID 83861</u>		<u>JON GRAVESTOCK</u> <u>1688 SHEPHERD RD</u> <u>SAINT MARIES, ID 83861</u> 3. <u>New</u> Registered Agent Signature												
4. <u>Limit of one filing, unless the filer is a manager or officer of the corporation.</u> <table border="0"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td><u>MANAGER</u></td> <td><u>JON GRAVESTOCK</u></td> <td><u>1688 Shepherd Rd.</u></td> <td><u>St Maries</u></td> <td><u>ID.</u></td> <td><u>83861</u></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>	<u>MANAGER</u>	<u>JON GRAVESTOCK</u>	<u>1688 Shepherd Rd.</u>	<u>St Maries</u>	<u>ID.</u>	<u>83861</u>
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5. Organized Under the Laws of: <u>IDAHO</u> <u>W 19213</u>		6. Signature <u>Jon Gravestock</u> Date <u>3-9-03</u> Name (Typed or Printed) <u>JON GRAVESTOCK</u> Title <u>MANAGER</u>													