No. **W 189**

Return to:
SECRETARY OF STATE
700 WEST JEFFERSON
PO BOX 83720
BOISE, ID 83720-0080

NO FILING FEE IF RECEIVED BY DUE DATE

Due no later than January 31, 2004
Annual Report Form

1. Mailing Address - Correct in this box if applicable

LOS COMPADRES, A LIMITED LIABILITY

PO BOX 118 ~~1118~~

WILSON, WY 83014

2. Registered Agent and Office **NO PO BOX**

JOHN G ST. CLAIR
2105 CORONADO ST

IDAHO FALLS, ID 83045 7495

3. New Registered Agent Signature

4. Limited Liability Companies: Enter Names and Addresses of Managers.

Office held	Name	Street or P.O. Address	City	State	Zip
Operating Manager	DAVID L. McINTYRE	PO Box 1118	WILSON	WYO	83014

5. Organized Under the Laws of:

WYOMING
W 189

6.
Signature _____ Date 12/22/03

Name (Typed or Printed) DAVID L. McINTYRE Title Oper. Manager

Issued 11/03/2003

Do Not Tape or Staple