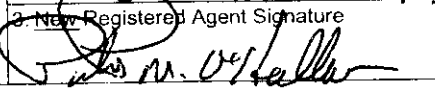
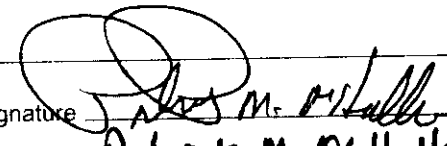


No. W 17135	Due no later than November 10, 2003 Annual Report Form		2. Registered Agent and Office NO PO BOX																		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable CUTPOST CORRAL, LLC FRANK L CHAPIN Patrick M. O'Halloran PO BOX 784 P.O. Box 2059 SANDPOINT, ID 83864 738 S. Center VALLEY, ROAD		FRANK L CHAPIN Patrick M. O'Halloran 240 CHURCH ST P.O. Box 2059 SANDPOINT, ID 83864 738 S. Center Valley Rd 3. New Registered Agent Signature 																		
4. Limited Liability Companies: Enter Names and Addresses of Members <table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>Director</td> <td>Patrick M. O'Halloran</td> <td>P.O. Box 2059</td> <td>Sandpoint</td> <td>ID</td> <td>83864</td> </tr> <tr> <td>Member</td> <td>Lena Cereghino</td> <td>P.O. Box 2059</td> <td>Sandpoint</td> <td>ID</td> <td>83864</td> </tr> </tbody> </table>				Office held	Name	Street or P.O. Address	City	State	Zip	Director	Patrick M. O'Halloran	P.O. Box 2059	Sandpoint	ID	83864	Member	Lena Cereghino	P.O. Box 2059	Sandpoint	ID	83864
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5. Organized Under the Laws of: IDAHO W 17135		6.  Signature _____ Date 11-20-03 Name (Typed or Printed) Patrick M. O'Halloran Title Director																			