No. J 278	Due no later than Nov 30, 2003 Annual Report Form	2. Registered Agent and Office NO PO BOX
		RONALD EGGLEŞTON
Return to:	Mailing Address - Correct in this box if applicable	306 LOCUST ST 1
SECRETARY OF STATE 700 WEST JEFFERSON	OUR PLACE LIMITED LIABILITY PARTNER	TWIN FALLS, ID 83301
PO BOX 83720 BOISE, ID 83720-0080	306 LOCUST ST	3. New Registered Agent Signature
NO FILING FEE IF	TWIN FALLS, ID 83301	
RECEIVED BY DUE DATE	the distribution is regired	
<ol> <li>Limited Liability Partner</li> </ol>	ships: No further information is reqired.	ity State <u>Zip</u>
Office held Name	Street or P.O. Address C	ily <u>olate</u>
5. Organized Under the Laws of:	6. Signature & out of Egiple	Low Date Low-
5. Organized Under the Laws of: IDAHO J 278	Signature A city of Eggle  Name Printed Pompilo Eggle	Date Spe-