

No. **W 29683**

**Due no later than April 30, 2005
Annual Report Form**

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

1. Mailing Address - Correct in this box, if applicable.

REFERRAL AND INFORMATION SERVICES,
~~451 2ND AVE WEST~~ 1537 Addison Ave E
TWIN FALLS, ID 83301

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

LEON MARTIN
~~451 2ND AVE WEST~~ 1537 Addison Ave E
TWIN FALLS, ID 83301

**NO FILING FEE IF
RECEIVED BY DUE DATE**

3. New Registered Agent Signature

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

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
member	Leon Martin	1537 Addison Ave E.	Twin Falls	Id	83301

5. Organized Under the Laws of:

IDAHO
W 29683

6.

Signature *Leon Martin* Date 2-28-05

Name (Typed or Printed) LEON MARTIN Title Administrator