

No. W 31409	Due no later than June 30, 2005 Annual Report Form		2. Registered Agent and Office NO PO BOX DOLORES A EFFINGER 124 KELLOGG ST KELLOGG, ID 83837												
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 MOUNTAIN HOMES, LLC. PO BOX 121 KELLOGG, ID 83837		3. <u>New</u> Registered Agent Signature												
4. Limited Liability Companies: Enter Names and Addresses of Members. <table style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px solid black;">Office held</th> <th style="text-align: left; border-bottom: 1px solid black;">Name</th> <th style="text-align: left; border-bottom: 1px solid black;">Street or P.O. Address</th> <th style="text-align: left; border-bottom: 1px solid black;">City</th> <th style="text-align: left; border-bottom: 1px solid black;">State</th> <th style="text-align: left; border-bottom: 1px solid black;">Zip</th> </tr> </thead> <tbody> <tr> <td>Member</td> <td>DOLORES A EFFINGER</td> <td>P.O. Box 121</td> <td>KELLOGG</td> <td>ID</td> <td>83837</td> </tr> </tbody> </table>				Office held	Name	Street or P.O. Address	City	State	Zip	Member	DOLORES A EFFINGER	P.O. Box 121	KELLOGG	ID	83837
Office held	Name	Street or P.O. Address	City	State	Zip										
Member	DOLORES A EFFINGER	P.O. Box 121	KELLOGG	ID	83837										
5. Organized Under the Laws of: <div style="text-align: center;">IDAHO W 31409</div>		6. <table style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <tr> <td style="width: 60%;">Signature <i>Dolores Eff</i></td> <td style="width: 40%;">Date <i>4/21/05</i></td> </tr> <tr> <td>Name <small>(Typed or Printed)</small> <i>Dolores A Effinger</i></td> <td>Title <i>member</i></td> </tr> </table>		Signature <i>Dolores Eff</i>	Date <i>4/21/05</i>	Name <small>(Typed or Printed)</small> <i>Dolores A Effinger</i>	Title <i>member</i>								
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