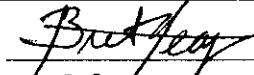
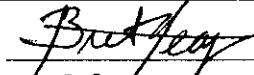
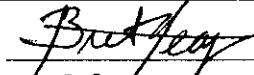


| <b>No. C 132537</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <b>Due no later than February 29, 2004</b><br><b>Annual Report Form</b>                                                                                                                                                                                                                                                                                                                                                   | 2. Registered Agent and Office <b>NO PO BOX</b><br>PAUL B WITHERS<br>818 MAIN ST<br>SALMON, ID 83467 |                                                                                              |                     |                                           |                        |       |     |      |            |       |        |    |  |          |            |                 |        |    |       |       |              |                  |        |    |       |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|---------------------|-------------------------------------------|------------------------|-------|-----|------|------------|-------|--------|----|--|----------|------------|-----------------|--------|----|-------|-------|--------------|------------------|--------|----|-------|
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>         RECEIVED BY DUE DATE</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 1. Mailing Address - Correct in this box, if applicable<br>HEAPS BROTHERS & SONS, INC.<br><br>34 N BAKER RD<br><br>SALMON, ID 83467                                                                                                                                                                                                                                                                                       | 3. <u>New</u> Registered Agent Signature                                                             |                                                                                              |                     |                                           |                        |       |     |      |            |       |        |    |  |          |            |                 |        |    |       |       |              |                  |        |    |       |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th style="text-align: left; width: 15%;">Office held</th> <th style="text-align: left; width: 20%;">Name</th> <th style="text-align: left; width: 35%;">Street or P.O. Address</th> <th style="text-align: left; width: 15%;">City</th> <th style="text-align: left; width: 10%;">State</th> <th style="text-align: left; width: 15%;">Zip</th> </tr> </thead> <tbody> <tr> <td>PRES</td> <td>JDEL HEAPS</td> <td>PO 22</td> <td>CARMEN</td> <td>ID</td> <td></td> </tr> <tr> <td>VP/TREAS</td> <td>BRET HEAPS</td> <td>34 N. BAKER RD.</td> <td>SALMON</td> <td>ID</td> <td>83467</td> </tr> <tr> <td>SECT.</td> <td>BROCK TELLER</td> <td>26 RANXHETTE DR.</td> <td>SALMON</td> <td>ID</td> <td>83467</td> </tr> </tbody> </table> |                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                      | Office held                                                                                  | Name                | Street or P.O. Address                    | City                   | State | Zip | PRES | JDEL HEAPS | PO 22 | CARMEN | ID |  | VP/TREAS | BRET HEAPS | 34 N. BAKER RD. | SALMON | ID | 83467 | SECT. | BROCK TELLER | 26 RANXHETTE DR. | SALMON | ID | 83467 |
| Office held                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Name                                                                                                                                                                                                                                                                                                                                                                                                                      | Street or P.O. Address                                                                               | City                                                                                         | State               | Zip                                       |                        |       |     |      |            |       |        |    |  |          |            |                 |        |    |       |       |              |                  |        |    |       |
| PRES                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | JDEL HEAPS                                                                                                                                                                                                                                                                                                                                                                                                                | PO 22                                                                                                | CARMEN                                                                                       | ID                  |                                           |                        |       |     |      |            |       |        |    |  |          |            |                 |        |    |       |       |              |                  |        |    |       |
| VP/TREAS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | BRET HEAPS                                                                                                                                                                                                                                                                                                                                                                                                                | 34 N. BAKER RD.                                                                                      | SALMON                                                                                       | ID                  | 83467                                     |                        |       |     |      |            |       |        |    |  |          |            |                 |        |    |       |       |              |                  |        |    |       |
| SECT.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | BROCK TELLER                                                                                                                                                                                                                                                                                                                                                                                                              | 26 RANXHETTE DR.                                                                                     | SALMON                                                                                       | ID                  | 83467                                     |                        |       |     |      |            |       |        |    |  |          |            |                 |        |    |       |       |              |                  |        |    |       |
| 5. Organized Under the Laws of:<br><br>IDAHO<br>C 132537                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 6. <table style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <tr> <td style="width: 60%;">           Signature  </td> <td style="width: 40%;">           Date <u>12-6-03</u> </td> </tr> <tr> <td>           Name (Typed or Printed) <u>BRET HEAPS</u> </td> <td>           Title <u>VP/TREAS.</u> </td> </tr> </table> |                                                                                                      | Signature  | Date <u>12-6-03</u> | Name (Typed or Printed) <u>BRET HEAPS</u> | Title <u>VP/TREAS.</u> |       |     |      |            |       |        |    |  |          |            |                 |        |    |       |       |              |                  |        |    |       |
| Signature                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Date <u>12-6-03</u>                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                      |                                                                                              |                     |                                           |                        |       |     |      |            |       |        |    |  |          |            |                 |        |    |       |       |              |                  |        |    |       |
| Name (Typed or Printed) <u>BRET HEAPS</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Title <u>VP/TREAS.</u>                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                      |                                                                                              |                     |                                           |                        |       |     |      |            |       |        |    |  |          |            |                 |        |    |       |       |              |                  |        |    |       |