


No. <b>W 7199</b>	<b>Due no later than October 31, 2003 Annual Report Form</b>		2. Registered Agent and Office <b>NO PO BOX</b>																								
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	1. Mailing Address <small>Correct in this box, if applicable</small>		DONNA D JACOBS 830 VISTA AVE  BOISE, ID 83705																								
	CETUS, LLC DONNA D JACOBS PO BOX 8286  BOISE, ID 83707																										
4. Limited Liability Companies: Enter Names and Addresses of Managers. <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></td> <td>Manager Donna Jacobs</td> <td>830 Vista Ave</td> <td>Boise</td> <td>ID</td> <td>83705</td> </tr> <tr> <td></td> <td>Manager Ronell Hansen</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td>Manager Maureen Murphy-Daly</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Office held	Name	Street or P.O. Address	City	State	Zip		Manager Donna Jacobs	830 Vista Ave	Boise	ID	83705		Manager Ronell Hansen						Manager Maureen Murphy-Daly				
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5. Organized Under the Laws of:  IDAHO W 7199	6.  Signature _____ Date <b>9/10/03</b> Name (Typed or Printed) <b>Donna Jacobs</b> Title <b>manager</b>																										