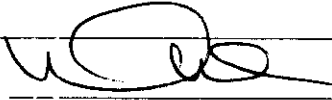


No. W 39448	Due no later than May 31, 2006 Annual Report Form		2. Registered Agent and Office NO PO BOX												
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable YELLOWPINE, LLC 420 E ELM ST CALDWELL, ID 83605		WILLIAM T BLACK 420 E ELM ST CALDWELL, ID 83605 3. <u>New</u> Registered Agent Signature												
4. Limited Liability Companies: Enter Names and Addresses of Members. <table border="1"> <thead> <tr> <th data-bbox="311 412 510 443"><u>Office held</u></th> <th data-bbox="510 412 820 443"><u>Name</u></th> <th data-bbox="820 412 1285 443"><u>Street or P.O. Address</u></th> <th data-bbox="1285 412 1506 443"><u>City</u></th> <th data-bbox="1506 412 1705 443"><u>State</u></th> <th data-bbox="1705 412 1895 443"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td data-bbox="311 443 510 505">Pres</td> <td data-bbox="510 443 820 505">William Black</td> <td data-bbox="820 443 1285 505">420 E Elm</td> <td data-bbox="1285 443 1506 505">Caldwell</td> <td data-bbox="1506 443 1705 505">ID</td> <td data-bbox="1705 443 1895 505">83605</td> </tr> </tbody> </table>				<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	Pres	William Black	420 E Elm	Caldwell	ID	83605
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>										
Pres	William Black	420 E Elm	Caldwell	ID	83605										
5. Organized Under the Laws of: IDAHO W 39448	6.  Signature _____ Date <u>3/7/06</u> Name (Typed or Printed) <u>William Black</u> Title <u>owner</u>														