

DEPT. OF STATE ST. JEFFERSON BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	Due no later than January 31, 2005 Annual Report Form	2. Registered Agent and Office NO PO BOX												
	1. Mailing Address - Correct in this box, if applicable 31 PADRE, LLC PO BOX 219 DOVER, ID 83825	CURTIS WYBORN 23487 HWY 2 SANDPOINT, ID 83864												
3. <u>New</u> Registered Agent Signature														
4. Limited Liability Companies: Enter Names and Addresses of Managers. <table border="1"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>MANAGER</td> <td>CURTIS WYBORN</td> <td>PO BOX 219</td> <td>DOVER</td> <td>ID</td> <td>83825</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>	MANAGER	CURTIS WYBORN	PO BOX 219	DOVER	ID	83825
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>									
MANAGER	CURTIS WYBORN	PO BOX 219	DOVER	ID	83825									
5. Organized Under the Laws of: IDAHO W 14117	6. Signature <u>Curtis Wyborn</u> Date <u>11-6-04</u> Name <small>(Typed or Printed)</small> <u>CURTIS WYBORN</u> Title <u>MANAGER</u>													