

| No. <b>W 6139</b><br><br>Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FEE REQUIRED</b><br><br><b>** FINAL NOTICE **</b>   | <b>Annual Report Form</b><br>Due No Later Than November 30, <b>1999</b><br><br>1. Mailing Address: Please Correct if Not Correct<br><br><b>CENTERS FARM, LLC</b><br><b>ALLEN LEE CENTERS</b><br><b>3770 SOUTH LINDER ROAD</b><br><br><b>MERIDIAN ID 83642</b> | 2. Registered Agent and Office <b>NOT A P.O. BOX</b><br><br><b>ALLEN LEE CENTERS</b><br><b>3770 SOUTH LINDER ROAD</b><br><br><b>MERIDIAN ID 83642</b><br><br>3. Organized Under the Laws of:<br><br><b>ID W 6139</b> |                 |           |                        |      |       |     |  |                    |                      |                 |           |              |
|--|---|--|-----------------|-----------|------------------------|------|-------|-----|--|--------------------|----------------------|-----------------|-----------|--------------|
| 4. Corporations: Enter Names and Business Addresses of <b>President, Secretary and Directors</b><br>Limited Liability Companies: Enter Names and Addresses of <input checked="" type="checkbox"/> <b>Managers</b> or <input type="checkbox"/> <b>Members</b> (check one)<br><br><table border="0"> <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><i>Lee Centers</i></td> <td><i>3770 S Linder</i></td> <td><i>Meridian</i></td> <td><i>ID</i></td> <td><i>83642</i></td> </tr> </tbody> </table> |   |  | Office held     | Name      | Street or P.O. Address | City | State | Zip |  | <i>Lee Centers</i> | <i>3770 S Linder</i> | <i>Meridian</i> | <i>ID</i> | <i>83642</i> |
| Office held  | Name  | Street or P.O. Address   | City            | State     | Zip                    |      |       |     |  |                    |                      |                 |           |              |
|  | <i>Lee Centers</i>  | <i>3770 S Linder</i>   | <i>Meridian</i> | <i>ID</i> | <i>83642</i>           |      |       |     |  |                    |                      |                 |           |              |
| 5. <u>New</u> Registered Agent Signature   | 6. Signature <i>Lee Centers</i> Date <i>Oct 99</i><br>Name (Typed or Printed) <i>Lee Centers</i> Title _____  |  |                 |           |                        |      |       |     |  |                    |                      |                 |           |              |

ISSUED: 10-02-1999

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