No. w 11074	Due no later than Feb 28, 2003 Annual Report Form	2. Registered Agent and Office NO PO B
Return to: SECRETARY OF STATE	1. Mailing Address - Correct in this box, if applicable	LUCILLE WALKER
700 WEST JEFFERSON	L.S. WALKER, LLC	539 RIMVIEW DR
PO BOX 83720	LUCILLE WALKER	TWIN FALLS, ID 83301
BOISE, ID 83720-0080	539 RIMVIEW DR	3. New Registered Agent Signature
NO FILING FEE IF	TWIN FALLS, ID 83301	3. New Registered Agent Signature
RECEIVED BY DUE DATE		
	nies: Enter Names and Addresses of Members.	
_	Street or P.O. Address Alker 539 Rimulew Dr + Win F	all Idaho 83301
manager/ Lucille W		
meinter		
5. Organized Under the Laws of:	6. Signature Lucille Walker	Date Feb 4 200.
Meinber		Date Feb 4 200.