





No. W 1632	Due no later than Oct 31, 2002 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	<div style="background-color: black; color: white; text-align: center; padding: 2px;">1 Mailing Address - Correct in this box, if applicable</div> WESTERN LEGENDS LC M J MCCARTHY W.F. LEHMAN PO BOX 5656 PO BOX 764 TWIN FALLS, ID 83303 5656 KETCHUM, ID 83340	M J MCCARTHY W.F. LEHMAN 2726 NORTHVIEW DR 106 CANNON DRIVE HAGERMAN, ID 83332 KETCHUM, ID 83340												
NO FILING FEE IF RECEIVED BY DUE DATE		3. New Registered Agent Signature 												
4. Limited Liability Companies: Enter Names and Addresses of Managers. <table style="width: 100%; margin-top: 10px;"> <thead> <tr> <th style="text-align: left;"><u>Office held</u></th> <th style="text-align: left;"><u>Name</u></th> <th style="text-align: left;"><u>Street or P.O. Address</u></th> <th style="text-align: left;"><u>City</u></th> <th style="text-align: left;"><u>State</u></th> <th style="text-align: left;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>Co-Manager</td> <td>W.F. Lehman</td> <td>PO BOX 764</td> <td>Ketchum</td> <td>IDAHO</td> <td>83440</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>	Co-Manager	W.F. Lehman	PO BOX 764	Ketchum	IDAHO	83440
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>									
Co-Manager	W.F. Lehman	PO BOX 764	Ketchum	IDAHO	83440									
5. Organized Under the Laws of: <div style="text-align: center;">IDAHO W 1632</div>	6. <table style="width: 100%; margin-top: 10px;"> <tr> <td style="width: 60%;">Signature </td> <td style="width: 40%;">Date 10-20-02</td> </tr> <tr> <td>Name <small>(Typed or Printed)</small> W.F. LEHMAN</td> <td>Title Co-Manager</td> </tr> </table>		Signature 	Date 10-20-02	Name <small>(Typed or Printed)</small> W.F. LEHMAN	Title Co-Manager								
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