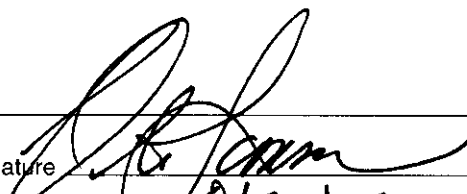


No. <b>W 32759</b>	<b>Due no later than August 31, 2005</b>		2. Registered Agent and Office <b>NO PO BOX</b>																			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>Annual Report Form</b>		OTIS W LEMMON																			
	1. Mailing Address - Correct in this box, if applicable  TILS LLC 250 S FIFTH ST 4TH FL BOISE, ID 83702		250 S FIFTH ST 4TH FL BOISE, ID 83702  3. <u>New</u> Registered Agent Signature																			
4. Limited Liability Companies: Enter Names and Addresses of Managers. <table border="0"> <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>JEFF SHNEIDER</td> <td>250 S. 5TH ST.</td> <td>BOISE</td> <td>ID.</td> <td>83702</td> </tr> <tr> <td>"</td> <td>OTIS LEMMON</td> <td>"</td> <td>"</td> <td>"</td> <td>"</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	JEFF SHNEIDER	250 S. 5TH ST.	BOISE	ID.	83702	"	OTIS LEMMON	"	"	"	"
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>																	
MANAGER	JEFF SHNEIDER	250 S. 5TH ST.	BOISE	ID.	83702																	
"	OTIS LEMMON	"	"	"	"																	
5. Organized Under the Laws of:  IDAHO W 32759		6.  Signature _____ Date <b>8.24.05</b> Name (Typed or Printed) <b>OTIS LEMMON</b> Title <b>MANAGER</b>																				