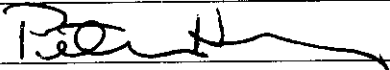


No. C 126948	Due no later than January 31, 2006 Annual Report Form		2. Registered Agent and Office NO PO BOX																		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable ADULT, CHILD, AND FAMILY ASSOCIATES PETER S HARVEY 834 FALLS AVE STE 1180 TWIN FALLS, ID 83301		PETER S HARVEY 834 FALLS AVE STE 1180 TWIN FALLS, ID 83301 3. <u>New</u> Registered Agent Signature																		
<p>4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.</p> <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>Pres.</td> <td>Peter Harvey</td> <td>625 Lynwood Blvd.</td> <td>Twin Falls</td> <td>ID</td> <td>83301</td> </tr> <tr> <td>Sec.</td> <td>Mary Harvey</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>	Pres.	Peter Harvey	625 Lynwood Blvd.	Twin Falls	ID	83301	Sec.	Mary Harvey	"	"	"	"
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Sec.	Mary Harvey	"	"	"	"																
5. Organized Under the Laws of: IDAHO C 126948	6. Signature  Date <u>11/18/05</u> Name <small>(Typed or Printed)</small> <u>Peter Harvey</u> Title <u>Pres.</u>																				