

No. W 12455	Due no later than July 31, 2005 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 MY HOME WORKSHOP, LLC 6099 S WALLFLOWER BOISE, ID 83716		MIKE L YOUNG 6099 S WALLFLOWER BOISE, ID 83716 3. <u>New</u> Registered Agent Signature																	
	4. Limited Liability Companies: Enter Names and Addresses of Managers. <table border="1"> <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>CO-OWNER MIKE YOUNG</td> <td>6099 S WALLFLOWER</td> <td>BOISE, ID</td> <td></td> <td>83716</td> </tr> <tr> <td></td> <td>CO-OWNER DEBORAH YOUNG</td> <td>"</td> <td>"</td> <td></td> <td>"</td> </tr> </tbody> </table>			Office held	Name	Street or P.O. Address	City	State	Zip		CO-OWNER MIKE YOUNG	6099 S WALLFLOWER	BOISE, ID		83716		CO-OWNER DEBORAH YOUNG	"	"	
Office held	Name	Street or P.O. Address	City	State	Zip															
	CO-OWNER MIKE YOUNG	6099 S WALLFLOWER	BOISE, ID		83716															
	CO-OWNER DEBORAH YOUNG	"	"		"															
5. Organized Under the Laws of: IDAHO W 12455	6. Signature <u>Deborah Young</u> Date <u>5-7-05</u> Name (Typed or Printed) <u>DEBORAH YOUNG</u> Title <u>CO-OWNER</u>																			

Issued 05/02/2005

Do Not Tape or Staple

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