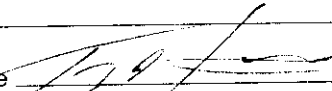
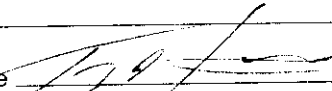
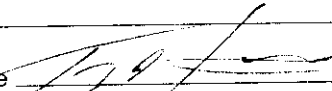


No. W 19490 Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	Due no later than June 30, 2004 Annual Report Form 1. Mailing Address - Correct in this box, if applicable NORTH IDAHO SPRINKLERS, LLC 6992 E MAPLEWOOD AVE # 3 POST FALLS, ID 83854 6955	2. Registered Agent and Office: NO PO BOX TERRY D LYNCH 6992 E MAPLEWOOD AVE #3 POST FALLS, ID 83854 6955 6992 E MAPLEWOOD AVE #3 POST FALLS, ID. 83854-6955 3. New Registered Agent Signature
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4. Limited Liability Companies: Enter Names and Addresses of Members.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
OWNER/member	TERRY D. LYNCH	6992 E. MAPLEWOOD AVE #3	Post Falls	ID	83854-6955
OWNER/member	Debra S. Lynch	6992 E MAPLEWOOD AVE #3	Post Falls	ID	83854-6955

5. Organized Under the Laws of: IDAHO W 19490	6. <table style="width: 100%;"> <tr> <td style="width: 60%;">Signature </td> <td style="width: 40%;">Date <u>4-19-04</u></td> </tr> <tr> <td>Name (Typed or Printed) <u>TERRY D. LYNCH</u></td> <td>Title <u>OWNER/member</u></td> </tr> </table>	Signature 	Date <u>4-19-04</u>	Name (Typed or Printed) <u>TERRY D. LYNCH</u>	Title <u>OWNER/member</u>
Signature 	Date <u>4-19-04</u>				
Name (Typed or Printed) <u>TERRY D. LYNCH</u>	Title <u>OWNER/member</u>				