

No. W 21053	Due no later than October 31, 2004 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	1. Mailing Address - Correct in this box, if applicable BLAISDELL, LLC LYNN R BLAISDELL 5170 DECATUR DR BOISE, ID 83704	LYNN R BLAISDELL 8878 W HACKAMORE BOISE, ID 83709
NO FILING FEE IF RECEIVED BY DUE DATE		3. <u>New</u> Registered Agent Signature

4. Limited Liability Companies: Enter Names and Addresses of Managers.

Office held	Name	Street or P.O. Address	City	State	Zip
Pres.	Lynn R. Blaisdell DDS	5170 Decatur Dr.	Boise	Id	83704
Sec	Lahna Blaisdell	" "	"	"	"

5. Organized Under the Laws of: <div style="text-align: center;">IDAHO W 21053</div>	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">Signature: <u><i>L.R. Blaisdell DDS</i></u></td> <td style="width: 40%;">Date: <u>8-10-04</u></td> </tr> <tr> <td>Name (Typed or Printed): <u>L.R. Blaisdell DDS</u></td> <td>Title: <u>Pres/owner</u></td> </tr> </table>	Signature: <u><i>L.R. Blaisdell DDS</i></u>	Date: <u>8-10-04</u>	Name (Typed or Printed): <u>L.R. Blaisdell DDS</u>	Title: <u>Pres/owner</u>
Signature: <u><i>L.R. Blaisdell DDS</i></u>	Date: <u>8-10-04</u>				
Name (Typed or Printed): <u>L.R. Blaisdell DDS</u>	Title: <u>Pres/owner</u>				