

<b>No. W 12749</b>	<b>Due no later than Aug 31, 2001</b> <b>Annual Report Form</b>		2. Registered Agent and Office <b>NO PO BOX</b>  CATHY REITZ 944 FILER AVE W  TWIN FALLS, ID 83301																		
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>	1. Mailing Address - Correct in this box, if applicable  STITCHIN' TIME, L.L.C. CATHY REITZ 944 FILER AVE W  TWIN FALLS, ID 83301		3. <u>New</u> Registered Agent Signature																		
4. Limited Liability Companies: Enter Names and Addresses of Members. <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 10%;"><u>Office held</u></th> <th style="text-align: left; width: 20%;"><u>Name</u></th> <th style="text-align: left; width: 40%;"><u>Street or P.O. Address</u></th> <th style="text-align: left; width: 10%;"><u>City</u></th> <th style="text-align: left; width: 10%;"><u>State</u></th> <th style="text-align: left; width: 10%;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>Member</td> <td>Cathy Reitz</td> <td>944 Filer Ave. W.</td> <td>Twin Falls</td> <td>ID</td> <td>83301</td> </tr> <tr> <td>Member</td> <td>Les Reitz</td> <td>944 Filer Ave. W.</td> <td>Twin Falls</td> <td>ID</td> <td>83301</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>	Member	Cathy Reitz	944 Filer Ave. W.	Twin Falls	ID	83301	Member	Les Reitz	944 Filer Ave. W.	Twin Falls	ID	83301
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5. Organized Under the Laws of:  IDAHO W 12749		6. Signature <u>Cathy Reitz</u> Date <u>6/14/01</u> Name (Typed or Printed) <u>Cathy Reitz</u> Title <u>Member</u>																			