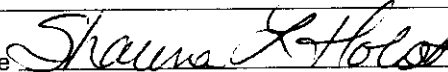


| No. W 15062 | Due no later than Apr 30, 2003 Annual Report Form | | 2. Registered Agent and Office NO PO BOX STEPHEN H TELFORD 2635 CHANNING WAY IDAHO FALLS, ID 83404 | | | | | | | | | | | | | | | | | | |
|--|---|--|---|--------------------|-------------|-------------------------------|-------------|--------------|------------|---------|-----------------|------------|------|----|-------|---------|-----------------|------------|------|----|-------|
| 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 HOLST INSTALLATION SHOP, LLC 2635 CHANNING WAY IDAHO FALLS, ID 83404 | | 3. <u>New</u> Registered Agent Signature | | | | | | | | | | | | | | | | | | |
| 4. Limited Liability Companies: Enter Names and Addresses of Managers. | | | | | | | | | | | | | | | | | | | | | |
| <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 15%;"><u>Office held</u></th> <th style="text-align: left; width: 25%;"><u>Name</u></th> <th style="text-align: left; width: 30%;"><u>Street or P.O. Address</u></th> <th style="text-align: left; width: 15%;"><u>City</u></th> <th style="text-align: left; width: 10%;"><u>State</u></th> <th style="text-align: left; width: 15%;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>Manager</td> <td>Jon Scott Holst</td> <td>PO Box 126</td> <td>Ucon</td> <td>ID</td> <td>83454</td> </tr> <tr> <td>Manager</td> <td>Shauna A. Holst</td> <td>PO Boc 126</td> <td>Ucon</td> <td>ID</td> <td>83454</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> | Manager | Jon Scott Holst | PO Box 126 | Ucon | ID | 83454 | Manager | Shauna A. Holst | PO Boc 126 | Ucon | ID | 83454 |
| <u>Office held</u> | <u>Name</u> | <u>Street or P.O. Address</u> | <u>City</u> | <u>State</u> | <u>Zip</u> | | | | | | | | | | | | | | | | |
| Manager | Jon Scott Holst | PO Box 126 | Ucon | ID | 83454 | | | | | | | | | | | | | | | | |
| Manager | Shauna A. Holst | PO Boc 126 | Ucon | ID | 83454 | | | | | | | | | | | | | | | | |
| 5. Organized Under the Laws of: <div style="text-align: center;">IDAHO</div> <div style="text-align: center;">W 15062</div> | | 6. Signature  Date _____ Name <small>(Typed or Printed)</small> <u>Shauna A. Holst</u> Title <u>Manager</u> | | | | | | | | | | | | | | | | | | | |