

No. W 10736	Due no later than January 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		TWILA G WILLCUT 21 COMMERCE DR HAYDEN LAKE, ID 83835													
	WILLCUT FINANCIAL SERVICES, L.L.C. PO BOX 1012 HAYDEN LAKE, ID 83835		3. <u>New</u> Registered Agent Signature													
<p>4. Limited Liability Companies: Enter Names and Addresses of Managers.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;"><u>Office held</u></th> <th style="text-align: left;"><u>Name</u></th> <th style="text-align: left;"><u>Street or P. O. Address</u></th> <th style="text-align: left;"><u>City</u></th> <th style="text-align: left;"><u>State</u></th> <th style="text-align: left;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>Manager/Member</td> <td>Twila G. Willcut</td> <td>21 Commerce Dr.</td> <td>Hayden</td> <td>ID</td> <td>83835</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/Member	Twila G. Willcut	21 Commerce Dr.	Hayden	ID	83835
<u>Office held</u>	<u>Name</u>	<u>Street or P. O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>											
Manager/Member	Twila G. Willcut	21 Commerce Dr.	Hayden	ID	83835											
5. Organized Under the Laws of: IDAHO W 10736	6. Signature  Name <small>Typed or Printed</small> <u>Twila G Willcut</u>		Date <u>11-16-04</u> Title <u>Man/member</u>													