	Due no later than May 31, 2004	2. Registered Agent and Office NO PO BOX
No. W 19174	Annual Report Form	DALE P THOMSON ESQ
Fleturn to:	Mailing Address - Correct in this box, if applicable	115 E MAIN ST
SECRETARY OF STATE	ALPINE VALLEY, LLC	
700 WEST JEFFERSON		REXBURG, ID 83440
PO BOX 83720	PO BOX 609	
BOISE, ID 83720-0080		3. New Registered Agent Signature
	REXBURG, ID 83440	
NO FILING FEE IF		
RECEIVED BY DUE DATE	nies: Enter Names and Addresses of Managers.	
 Limited Liability Compa 	mes. Enter Names and Address Cit	y State <u>Zip</u>
Office held Name	Street or P.O. Address	
	napple 232 South 4th West Re	exburg ID 83440
Manager Brad Cr	IMPPIC	
	127 Couth Ath West	Rexburg ID 83440
Manager Robert	Don Chapple 137 South 4th West	Rexburg ID 83440
Manager Robert	Don Chapple 137 South 4th West	Rexburg ID 83440
Manager Robert	Don Chapple 137 South 4th West	Rexburg ID 83440
Manager Robert	Don Chapple 137 South 4th West	Rexburg ID 83440
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Manager Robert	Don Chapple 137 South 4th West	Rexburg ID 83440
Manager Robert	Don Chapple 137 South 4th West	Render
Manager Robert	Don Chapple 137 South 4th West	Render
Manager Robert 5. Organized Under the Laws of:	Don Chapple 137 South 4th West	Rexburg ID 83440
Manager Robert	Don Chapple 137 South 4th West 6. Signature	Date 03.23.04
Manager Robert 5. Organized Under the Laws of:	Don Chapple 137 South 4th West 6. Signature	Date 03.23.04
Manager Robert 5. Organized Under the Laws of: IDAHO	Don Chapple 137 South 4th West	Date 03.23.04