No. C 155418	Due no later than July 31, 2005	2. Registered Agent and Office NO PO BO
Return to:	Annual Report Form	
SECRETARY OF STATE	1. Mailing Address - Correct in this box, if applicable	MICHAEL S HOMAN 2229 W STATE ST STE B
700 WEST JEFFERSON	NORTHSLOPE ESTATES SUBDIVISION HOME	BOISE, ID 83702
PO BOX 83720 BOISE, ID 83720-0080	2229 W STATE ST STE B BOISE, ID 83702	00,02
BOISE, ID 83720-0080	BOISE, ID 63702	
NO FILING FEE IF		3. New Registered Agent Signature
RECEIVED BY DUE DATE		3 - S - S - S - S - S - S - S - S - S -
	omos and Business Add	
Official in a second se	ames and Business Addresses of President, Secre	etary and Directors.
Office held Name	Street or P.O. Address	
	Oily	
	S. Homan 2229 W. State st. B	Boise ID 83702
Member Michael	S. Homan 2229 W. State St. B	Boise ID 83702
Member Michael	S. Homan 2229 W. State st. B	Boise ID 83702
Member Michael 5. Organized Under the Laws of: IDAHO	S. Homan 2229 W. State St. B	Boise ID 83702
Member Michael	S. Homan 2229 W. State st. B	Boise ID 83702