

No. C120128	Annual Report Form Due No Later Than November 30, 1999		2. Registered Agent and Office NOT A P.O. BOX																			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED * FIRST NOTICE *	1. Mailing Address - Please Correct, If Not Correct WPMHI, INC. DAVID BLAKESLEE 2392 GRANDVIEW DR N. TWIN FALLS ID 83301		DAVID BLAKESLEE 2392 GRANDVIEW DR N. TWIN FALLS ID 83301 3. Organized Under the Laws of: ID C120128																			
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one) <table border="1" data-bbox="16 372 1437 532"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>President</td> <td>David Blakeslee</td> <td>2392 Grandview Dr. N.</td> <td>Twin Falls, ID</td> <td></td> <td>83301</td> </tr> <tr> <td>VP/Sec/Tres</td> <td>Shirley Blakeslee</td> <td>2392 Grandview Dr. N</td> <td>Twin Falls, ID</td> <td></td> <td>83301</td> </tr> </tbody> </table>					Office held	Name	Street or P.O. Address	City	State	Zip	President	David Blakeslee	2392 Grandview Dr. N.	Twin Falls, ID		83301	VP/Sec/Tres	Shirley Blakeslee	2392 Grandview Dr. N	Twin Falls, ID		83301
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5. Signature of New Registered Agent		6. <table border="0"> <tr> <td>Signature</td> <td><i>Shirley Blakeslee</i></td> <td>Date</td> <td>7-15-99</td> </tr> <tr> <td>Name (Typed or Printed)</td> <td>Shirley Blakeslee</td> <td>Title</td> <td>VP/Sec/Tres</td> </tr> </table>			Signature	<i>Shirley Blakeslee</i>	Date	7-15-99	Name (Typed or Printed)	Shirley Blakeslee	Title	VP/Sec/Tres										
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ISSUED: 07-03-1999

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