

No. **W 15792**

**Due no later than June 30, 2004
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

1 Mailing Address - Correct in this box, if applicable:

SOUTHPOINTE, LLC
PO BOX 50130
IDAHO FALLS, ID 83405

CHARLES A HOMER
~~XXXXXX~~ 1000 River Walk
~~XXXXXX~~ Drive
~~XXXXXX~~ #200
Idaho Falls, ID 83402
3. New Registered Agent Signature

**NO FILING FEE IF
RECEIVED BY DUE DATE**

4. **Limited Liability Companies: Enter Names and Addresses of Members.**

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Member	Arnold Byrd	P.O. Box 9178	Jackson	WY	83002

5. Organized Under the Laws of:

IDAHO
W 15792

6.

Signature

Name (Typed or Printed)

Charles A. Homer

Date

6/28/04

Title

Authorized Agent