

| No. C 128776 | Due no later than May 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 MEDICINE WOMAN, INC. (THE) BARBARA R BARNETT PO BOX 613 CASCADE, ID 83611 | | BARBARA R BARNETT 32 W PROSPECTORS DR CASCADE, ID 83611 3. <u>New</u> Registered Agent Signature | | | | | | | | | | | | |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table border="0"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>Pres.</td> <td>Barbara R. Barnett</td> <td>PO Box 613</td> <td>Cascade</td> <td>Idaho</td> <td>83611</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> | Pres. | Barbara R. Barnett | PO Box 613 | Cascade | Idaho | 83611 |
| <u>Office held</u> | <u>Name</u> | <u>Street or P.O. Address</u> | <u>City</u> | <u>State</u> | <u>Zip</u> | | | | | | | | | | |
| Pres. | Barbara R. Barnett | PO Box 613 | Cascade | Idaho | 83611 | | | | | | | | | | |
| 5. Organized Under the Laws of: IDAHO C 128776 | | 6. Signature <u>Barbara R. Barnett</u> Date <u>3-5-05</u> Name <small>(Typed or Printed)</small> <u>Barbara R. Barnett</u> Title <u>President</u> | | | | | | | | | | | | | |