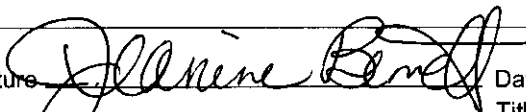


No. W 6240	Due no later than May 31, 2001 Annual Report Form	2. Registered Agent and Office NO PO BOX												
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable ERB LIMITED, L.L.C. JEANINE BENNETT PO BOX 616 LEWISTON, ID 83501	JEANINE BENNETT 411 D STREET LEWISTON, ID 83501 3. <u>New</u> Registered Agent Signature												
4. Limited Liability Companies: Enter Names and Addresses of Managers. <table border="0" style="width: 100%;"> <thead> <tr> <th style="text-align: left;"><u>Office held</u></th> <th style="text-align: left;"><u>Name</u></th> <th style="text-align: left;"><u>Street or P.O. Address</u></th> <th style="text-align: left;"><u>City</u></th> <th style="text-align: left;"><u>State</u></th> <th style="text-align: left;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>Managing Partner</td> <td>Jeanine Bennett</td> <td>PO Box 616</td> <td>Lewiston, ID</td> <td></td> <td>83501</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>	Managing Partner	Jeanine Bennett	PO Box 616	Lewiston, ID		83501
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>									
Managing Partner	Jeanine Bennett	PO Box 616	Lewiston, ID		83501									
5. Organized Under the Laws of: IDAHO W 6240	6.  Signature _____ Date <u>3/12/01</u> Name <small>(Typed or Printed)</small> <u>Jeanine Bennett</u> Title: <u>Managing Partner</u>													