

No. W 12427	Due no later than Jul 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		DELBERT LUNDERS ROUTE 2 BOX 457-C GRANGEVILLE, ID 83530																		
	MILLS FAMILY LIMITED LIABILITY CO. DELBERT LUNDERS ROUTE 2 BOX 457-C GRANGEVILLE, ID 83530		3. New Registered Agent Signature																		
4. Limited Liability Companies: Enter Names and Addresses of Managers. <table border="1"> <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>Manager</td> <td>Carolyn M. Poth</td> <td>P.O. Box 303 701 South 3rd</td> <td>Grimes</td> <td>IA</td> <td>50111</td> </tr> <tr> <td colspan="6">Carolyn M. Poth 6-6-01 Carolyn M. Poth Manager</td> </tr> </tbody> </table>				Office held	Name	Street or P.O. Address	City	State	Zip	Manager	Carolyn M. Poth	P.O. Box 303 701 South 3rd	Grimes	IA	50111	Carolyn M. Poth 6-6-01 Carolyn M. Poth Manager					
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5. Organized Under the Laws of: IDAHO W 12427	6. Signature <u>Delbert Lunders</u> Date <u>June 12, 2001</u> Name (Typed or Printed) <u>Delbert Lunders</u> Title: <u>Registered Agent</u>																				