

No. **W 10773**

**Due no later than Jan 31, 2002  
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

SACCONI FAMILY RESTURANTS L.L.C.  
1005 KYLER  
HAYDEN, ID 83835

MICHAEL F SACCONI  
1005 KYLER  
HAYDEN, ID 83835

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	Michael F Saccone	1005 W. Kyler Ave,	Hayden	Id	83835
Member	Debe L. Saccone	Same			

5. Organized Under the Laws of:

IDAHO  
W 10773

6.

Signature

Date

1/7/01

Name (Typed or Printed)

Michael Saccone

Title

Member