

No. **W 22336**

**Due no later than January 31, 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. Managing Address - Correct in this box, if applicable.

FULLER3 LLC
DORIS A FULLER
1511 NORTSHORE DR
SANDPOINT, ID 83864

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SANDPOINT, ID 83864

3. New Registered Agent Signature

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

4. Limited Liability Companies: Enter Names and Addresses of Managers.

<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	Doris A. Fuller	1511 Northshore Dr	Sandpoint Id		83864

5. Organized Under the Laws of:

IDAHO
W 22336

6.

Signature

Doris A Fuller

Date

11/9/04

Name (Typed or Printed)

Doris A Fuller

Title

Managing Partner