

No. W 37527	Due no later than March 31, 2006 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		SUZANNE M KWAPICH 540 SECOND AVE N STE B KETCHUM, ID <u>83440</u> 83340													
	SUZANNE M. KWAPICH, LLC 540 SECOND AVE N STE B P.O. Box 5733 KETCHUM, ID 83440 83340															
4. Limited Liability Companies: Enter Names and Addresses of Members. <table border="1"> <thead> <tr> <th data-bbox="311 409 541 440"><u>Office held</u></th> <th data-bbox="541 409 829 440"><u>Name</u></th> <th data-bbox="829 409 1338 440"><u>Street or P.O. Address</u></th> <th data-bbox="1338 409 1548 440"><u>City</u></th> <th data-bbox="1548 409 1725 440"><u>State</u></th> <th data-bbox="1725 409 1902 440"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td data-bbox="311 466 541 497">MEMBER</td> <td data-bbox="541 466 829 497">SUZANNE M. KWAPICH</td> <td data-bbox="829 466 1338 497">P.O. Box 5733</td> <td data-bbox="1338 466 1548 497">KETCHUM</td> <td data-bbox="1548 466 1725 497">ID</td> <td data-bbox="1725 466 1902 497">83340</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>	MEMBER	SUZANNE M. KWAPICH	P.O. Box 5733	KETCHUM	ID	83340
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>											
MEMBER	SUZANNE M. KWAPICH	P.O. Box 5733	KETCHUM	ID	83340											
5. Organized Under the Laws of: IDAHO W 37527		6. Signature <u>Suzanne M. Kwapich</u> Date <u>3/23/06</u> Name <small>(Typed or Printed)</small> <u>SUZANNE M. KWAPICH</u> Title <u>OWNER/MEMBER</u>														

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