

No. W 36120	Due no later than January 31, 2006 Annual Report Form		2. Registered Agent and Office NO PO BOX MICHAEL J SWOPE 2897 SWALLOWTAIL LANE BOISE, ID 83706														
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 WHATEVER, LLC MICHAEL J SWOPE 2897 SWALLOWTAIL LANE BOISE, ID 83706		3. <u>New</u> Registered Agent Signature														
4. Limited Liability Companies: Enter Names and Addresses of Managers. <table style="width: 100%; border: none;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px solid black;"><u>Office held</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>Name</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>Street or P.O. Address</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>City</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>State</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>manager</td> <td>Mike Swope</td> <td rowspan="2">2897 Swallowtail</td> <td rowspan="2">Boise</td> <td rowspan="2">ID</td> <td rowspan="2">83706</td> </tr> <tr> <td>manager</td> <td>Mary Jane Swope</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>	manager	Mike Swope	2897 Swallowtail	Boise	ID	83706	manager	Mary Jane Swope
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>												
manager	Mike Swope	2897 Swallowtail	Boise	ID	83706												
manager	Mary Jane Swope																
5. Organized Under the Laws of: IDAHO W 36120		6. Signature <u>Mary Jane Swope</u> Date <u>11-8-05</u> Name <small>(Typed or Printed)</small> <u>Mary Jane Swope</u> Title <u>manager</u>															

Issued 11/01/2005

Do Not Tape or Staple

200601001860