

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                             |                                                                                                                                                 |                                                                                                                                                    |                    |             |                               |             |              |            |                    |  |  |  |  |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|-------------|-------------------------------|-------------|--------------|------------|--------------------|--|--|--|--|--|
| <b>No. C 93836</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <b>Annual Report Form 1999</b><br><i>Due No Later Than November 30,</i>                                                                                                                     |                                                                                                                                                 | <b>2. Registered Agent and Office NOT A P.O. BOX</b><br><del>DEBORAH ZAK</del><br><del>16823 N NELSON'S LOOP</del><br><br><b>RATHDRUM ID 83858</b> |                    |             |                               |             |              |            |                    |  |  |  |  |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FEE REQUIRED</b><br><br><b>* FIRST NOTICE *</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <b>1. Mailing Address - Please Correct if Not Correct</b><br><br>NORTHWEST CLASSIC MOTORCYCLE<br><del>DEBORAH ZAK</del><br><del>16823 N NELSON'S LOOP</del><br><br><b>RATHDRUM ID 83858</b> |                                                                                                                                                 | <b>3. Organized Under the Laws of:</b><br><br>ID C 93836                                                                                           |                    |             |                               |             |              |            |                    |  |  |  |  |  |
| <b>4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors</b><br><b>Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one)</b><br><br><table style="width: 100%; border: none;"> <tr> <td style="text-align: center;"><u>Office held</u></td> <td style="text-align: center;"><u>Name</u></td> <td style="text-align: center;"><u>Street or P.O. Address</u></td> <td style="text-align: center;"><u>City</u></td> <td style="text-align: center;"><u>State</u></td> <td style="text-align: center;"><u>Zip</u></td> </tr> <tr> <td colspan="6" style="height: 150px; vertical-align: middle; text-align: center; font-size: 2em;">           See Attached paper         </td> </tr> </table> |                                                                                                                                                                                             |                                                                                                                                                 |                                                                                                                                                    | <u>Office held</u> | <u>Name</u> | <u>Street or P.O. Address</u> | <u>City</u> | <u>State</u> | <u>Zip</u> | See Attached paper |  |  |  |  |  |
| <u>Office held</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <u>Name</u>                                                                                                                                                                                 | <u>Street or P.O. Address</u>                                                                                                                   | <u>City</u>                                                                                                                                        | <u>State</u>       | <u>Zip</u>  |                               |             |              |            |                    |  |  |  |  |  |
| See Attached paper                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                             |                                                                                                                                                 |                                                                                                                                                    |                    |             |                               |             |              |            |                    |  |  |  |  |  |
| <b>5. Signature of New Registered Agent</b><br><br><i>Phyllis Hill</i>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                             | <b>6.</b><br>Signature <i>Phyllis Hill</i> Date <i>9-4-99</i><br>Name (Typed or Printed) <i>Phyllis Hill</i> Title <i>Secretary / Treasurer</i> |                                                                                                                                                    |                    |             |                               |             |              |            |                    |  |  |  |  |  |

ISSUED: 07-03-1999

31143

9-4-99

# 1 Northwest Classic Motorcycle  
Phyllis Hill  
337 3rd St. Milltown  
St. Maries, Id 83861

# 2 Phyllis Hill  
337 3rd Milltown  
St. Maries, Id 83861

# 3 same

#4 President : Gary Compasso  
P.O. Box 323, 1  
Post Falls, Id 83854

Secretary/Treasure : Phyllis Hill  
337 3rd Milltown  
St. Maries, Id 83861

Board of Directors : Neil Cooper  
819 C St  
CO'A Idaho 83814

Don Evans

826 Compton St.

Post Falls, Id 83854

Gary Hill

334 3rd Milltown

St. Maries, Id 83861

Bret Samms

P.O. Box 1638

CO'A Id 83816

Alan Blum

4505 N. Ashton Rd.

Otis Orchards, Wa 99027