

No. C 75165	Annual Report Form Due No Later Than November 30, 1995		2. Registered Agent and Office NOT A P.O. BOX																								
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED	1. Mailing Address - Please Correct, If Not Correct LIGHTNING CREEK, INC. DAVID L. REYNOLDS P. O. BOX 358 CLARK FORK ID 83811		DAVID L. REYNOLDS 4TH AND HILL 1585 PENINSULA RD CLARK FORK ID 83811 3. Organized Under the Laws of: ID C 76165																								
* FIRST NOTICE * CLARK FORK ID 83811 ID C 76165																											
4. Corporations: Enter Names and Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one) <table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>PRES.</td> <td>DAVID L. REYNOLDS</td> <td>1585 PENINSULA RD</td> <td>CLARK FORK</td> <td>ID</td> <td>83811</td> </tr> <tr> <td>SEC/TREAS.</td> <td>ANTHONY REYNOLDS</td> <td>" " "</td> <td>"</td> <td>"</td> <td>"</td> </tr> <tr> <td>DIRECTOR</td> <td>BRIAN REYNOLDS</td> <td>7822 HWY 99 SE</td> <td>OLYMPIA</td> <td>WA</td> <td>98501</td> </tr> </tbody> </table>				Office held	Name	Street or P.O. Address	City	State	Zip	PRES.	DAVID L. REYNOLDS	1585 PENINSULA RD	CLARK FORK	ID	83811	SEC/TREAS.	ANTHONY REYNOLDS	" " "	"	"	"	DIRECTOR	BRIAN REYNOLDS	7822 HWY 99 SE	OLYMPIA	WA	98501
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5. NATURE OF BUSINESS TRAILER PARK	6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. Signature: <u>David L. Reynolds</u> Date: <u>7/19/96</u> Name (Typed or Printed): <u>DAVID L. REYNOLDS</u> Title: <u>PRES.</u>																										

ISSUED: 07-06-1996

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