No. C 63842	Annual Report Form  Due No Later Than November 30,  1. Mailing Address - Please Correct, if Not Correct	2. Registered Agent and Office NOT A P.O. BOX CONSOLIDATED PROPERTY
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED	RIVER RUN PHASE 1-A LOCAL AS ASSOCIATION MANAGEMENT P. O. BOX 2666	168 N 9TH STE 250  90ISE ID 83702
* FIRST NOTICE *	BOISE ID 83701  Addresses of President, Secretary and Directors or Names and Addresses of Managers or Members	3. Organized Under the Laws of:
Office held Name	Street or P.O. Address  ARDING  2036 CREEKSIDE	s (check one) <u>City</u> <u>State</u> <u>Zip</u> £01 ID 83706
NATURE OF BUSINESS HOMEOWNERS ASSOC	6. I certify that this Annual Report has been a knowledge true, correct and complete.  Signature PERN HARDING	Date 9//9/96
ISSUED: 07-06-199	Printed)	Title PRES/DELECANE,
Marie Carlos Car	₹	<b></b>

T.