

INSTRUCTIONS ON REVERSE SIDE

ISSUED: 07-01-1993

No. 14158	Idaho Corporation Annual Report Form	2. Registered Agent and Office NOT A P.O. BOX
Return To Secretary of State Room 203, Statehouse Boise, ID 83720 * FIRST NOTICE * NO FEE REQUIRED	Due No Later Than November 1, 1993	ROBERT B GAGON 591 PARK AVE IDAHO FALLS ID 83401
	1. Mailing Address: IDAHO TITLE AND TRUST COMPANY SECRETARY P.O. BOX 50367 IDAHO FALLS ID 83405	
3. Incorporated Under The Laws of ID		NO: 14158

4. Names and Addresses of Officers and Directors

MUST BE PRINTED OR TYPED

Name

Street or P.O. Address

City

State

Zip

President:	ROBERT B. GAGON	591 PARK AVE	IDAHO FALLS	ID	83402
Secretary:	GREGORY L. CROCKETT	428 PARK AVE	IDAHO FALLS	ID	83402
Directors:	MOLLY B. GAGON	591 PARK AVE.	IDAHO FALLS	ID	83402

5. Nature of Business

TITLE INSURANCE - ESCRONS

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

Name (Typed or Printed)

Date

Title

ROBERT B. GAGON

7-8-93

PRESIDENT