No. # 2255		Innual Report Form		gent and Office NOT A P.O. B	iox	
Return to: SECRETARY OF STATE	1. Mailing Address	- Please Correct, If Not Correct		IN ST STE 1015	ан М 81 П 444	
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		KLOSTERMAN	BOISE	ID 8373	32	
NO FEE REQUIRED		αν απος 'ν', τη τους.	3. Organized U	3. Organized Under the Laws of:		
* FIRST NOTICE *	EAGLE	ID 33616	ID	₩ 2255		
. Corporations: Enter Names an Limited Liability Companies: En	d Addresses of Prester Names and Addresses	sident, Secretary and Directors esses of 🎽 Managers or 🛛 I	Members (check one)			
Office held Name		Street or P.O. Address	City	State Zip		
MANAGER LARRY E	ISTI-AND	P.O. BOX 2696	BOISÉ BOISÉ	10 83101	/	
			4	10 83901		
MANAGER ROBERT K	LOSTERMAN	P.O. BOX 2696	BOISE	NO OSICI		
MANTGEN NURSAN N		, <u>-</u>				
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SIGNATURE OF CURR	ENT RA 6. 10	ertify that this Annual Report ha	as been examined by m	e and is to the best of my	1	
	1	nature	Esternen Date			
ANY LAWFUL		Diagon	-			
	Nar	me (Typed or <u>KONERT K</u>	LOSTERMAN Title	YANAGER	∽⊱	
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