

No. W 645	Annual Report Form 1990 Due No Later Than November 30,		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 * FIRST NOTICE *	1. Mailing Address - Please Correct, If Not Correct ALL COYOTE E.L.C. JAMES B CLARK 10400 OVERLAND RD BOISE ID 83709		JAMES B CLARK 10400 OVERLAND RD BOISE ID 83709 3. Organized Under the Laws of: ID A 646													
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" data-bbox="21 351 1463 457"> <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>Manager</td> <td>J.B. Clark</td> <td>10400 Overland</td> <td>Boise</td> <td>Id</td> <td>83709</td> </tr> </tbody> </table>					Office held	Name	Street or P.O. Address	City	State	Zip	Manager	J.B. Clark	10400 Overland	Boise	Id	83709
Office held	Name	Street or P.O. Address	City	State	Zip											
Manager	J.B. Clark	10400 Overland	Boise	Id	83709											
5. SIGNATURE OF CURRENT RA	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>J.B. Clark</u> Date <u>7-18-96</u> Name (Typed or Printed) <u>J.B. Clark</u> Title _____															

ISSUED: 37-38-1995

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