

90170

<b>No.</b>	<b>Idaho Corporation Annual Report Form</b>	2. Registered Agent and Office NOT A P.O. BOX
Return To  <b>Secretary of State</b> <b>Room 203, Statehouse</b> <b>Boise, ID 83720</b>  <b>* FIRST NOTICE *</b> <b>NO FEE REQUIRED</b>	Due No Later Than November 1, <b>1992</b> 1. Mailing Address - Please Correct If Not Correct <b>NORTH IDAHO ESCROW, INC.</b> <b>G. W. HAIGHT</b> <b>1117 SHERMAN AVE. #202</b>  <b>COEUR D'ALENE ID 83814 0000</b>	<b>G. W. HAIGHT</b> <b>1117 SHERMAN AVE. #202</b>  <b>COEUR D'ALENE ID 83814</b>  3. Incorporated Under The Laws of <b>ID</b> <b>NO: 96170</b>

4. Names and Addresses of Officers and Directors

	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President:	<i>G.W. Haight</i>	<i>P.O. Box 962</i>	<i>CDA</i>	<i>ID</i>	<i>83814</i>
Secretary:	<i>W. Oea Haight</i>	<i>(same)</i>	<i>(same)</i>	<i>(same)</i>	<i>(same)</i>
Directors:	<i>(same)</i>	<i>(same)</i>	<i>(same)</i>	<i>(same)</i>	<i>(same)</i>

5. Nature of Business  <i>Escrow Service</i>	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 <i>G.W. Haight</i> Date <i>7/9/92</i> Name <i>G.W. Haight</i> Title <i>President</i>
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