

No. W 155	Annual Report Form 1995 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 YEAMAN PROPERTIES, LLC PHILIP E PETERSON 318 FIFTH STREET LEWISTON ID 83501		PHILIP E PETERSON 318 FIFTH STREET LEWISTON ID 83501 3. Organized Under the Laws of: ID W 155																			
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"> <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>Member</td> <td>Walter W. Seely</td> <td>1918 Valleyview Dr.</td> <td>Clatskanie</td> <td>OR</td> <td>97102</td> </tr> <tr> <td>"</td> <td>Maynard A. Seely</td> <td>"</td> <td>"</td> <td>"</td> <td>"</td> </tr> </tbody> </table>					Office held	Name	Street or P.O. Address	City	State	Zip	Member	Walter W. Seely	1918 Valleyview Dr.	Clatskanie	OR	97102	"	Maynard A. Seely	"	"	"	"
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"	Maynard A. Seely	"	"	"	"																	
5. SIGNATURE OF CURRENT RA ANY LAWFUL ISSUED: 37-08-1996		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>Philip E. Peterson</u> Date <u>8/1/96</u> Name (Typed or Printed) <u>Philip E Peterson</u> Title <u>Agent</u>																				