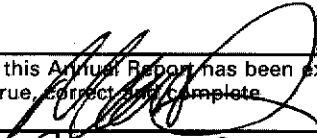


No. <b>W 2478</b>	<b>Annual Report Form</b> 1995 Due No Later Than November 30,		2. Registered Agent and Office <b>NOT A P.O. BOX</b>																			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FEE REQUIRED</b> <b>** FINAL NOTICE **</b>	1. Mailing Address - Please Correct, If Not Correct  <b>WINDWALKER PARASAIL LLC</b> <b>PAUL ROBERSON</b> <b>PO BOX 246</b>  <b>SAGLE</b> ID <b>83860</b>		<b>PAUL ROBERSON</b> <b>THIRD &amp; LAKE STREETS</b>  <b>SANDPOINT</b> ID <b>83864</b>  3. Organized Under the Laws of: ID W 2478																			
4. Corporations: Enter Names and Addresses of <b>President, Secretary and Directors</b> Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input checked="" 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>OWNER/MANAGER</td> <td>Paul W Roberson Jr</td> <td>P.O. BOX 246</td> <td>SAGLE</td> <td>ID</td> <td>83860</td> </tr> <tr> <td>"</td> <td>Frances T. Roberson</td> <td>" "</td> <td>" "</td> <td>" "</td> <td>" "</td> </tr> </tbody> </table>					Office held	Name	Street or P.O. Address	City	State	Zip	OWNER/MANAGER	Paul W Roberson Jr	P.O. BOX 246	SAGLE	ID	83860	"	Frances T. Roberson	" "	" "	" "	" "
Office held	Name	Street or P.O. Address	City	State	Zip																	
OWNER/MANAGER	Paul W Roberson Jr	P.O. BOX 246	SAGLE	ID	83860																	
"	Frances T. Roberson	" "	" "	" "	" "																	
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  Date <b>12/16/96</b> Name (Typed or Printed) <b>Paul W Roberson Jr</b> Title <b>OWNER/MANAGER</b>																				

ISSUED: 10-05-1996

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