

No. W 1081	Annual Report Form 1995 <i>Due No Later Than November 30,</i>		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 ** FINAL NOTICE **	1. Mailing Address - Please Correct, If Not Correct RMR LTD CO LEE S NEWBILL 5252 MATSON RD VIOLA ID 83872		LEE S NEWBILL 5252 MATSON RD VIOLA ID 83872 3. Organized Under the Laws of: ID W 1081																			
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 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/PARTNER</td> <td>LEE NEWBILL</td> <td>5252 MATSON Rd</td> <td>VIOLA</td> <td>ID</td> <td>83872</td> </tr> <tr> <td>"</td> <td>STACY SMISEK</td> <td>416 N JEFFERSON</td> <td>MOSCOW</td> <td>ID</td> <td>83843</td> </tr> </tbody> </table>					Office held	Name	Street or P.O. Address	City	State	Zip	OWNER/PARTNER	LEE NEWBILL	5252 MATSON Rd	VIOLA	ID	83872	"	STACY SMISEK	416 N JEFFERSON	MOSCOW	ID	83843
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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>Lee S Newbill</u> Date <u>11-4-96</u> Name (Typed or Printed) <u>LEE S. NEWBILL</u> Title <u>OWNER/PARTNER</u>																				

ISSUED: 10-05-1996

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