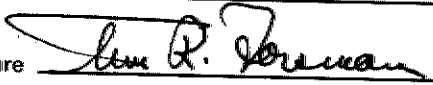


No. C 65219	Annual Report Form Due No Later Than November 30, 1997		2. Registered Agent and Office NOT A P.O. BOX CLEO FORSMANN, 414 MAIN COTTONWOOD ID 83522
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED	1. Mailing Address - Please Correct, If Not Correct PRAIRIE RETIREMENT CONDOMINI CLEO FORSMANN P.O. BOX 37 COTTONWOOD ID 83522		3. Organized Under the Laws of: ID C 65219
* FIRST NOTICE *			
4. Corporations: Enter Names and Business 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)			
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u> <u>State</u> <u>Zip</u>
PRESIDENT & DIRECTOR	FR. GEORGE KING	PO BOX 1169	OROFINO ID 83544-1169
SECRETARY & DIRECTOR	TIM R. FORSMANN	PO BOX 412	COTTONWOOD ID 83522-0412
DIRECTOR	LESTER LAMB	RT 1 BOX 143-6	COTTONWOOD ID 83522
5.		6.	
		Signature <u></u> Date <u>10/28/97</u>	
		Name (Typed or Printed) <u>TIM R FORSMANN</u> Title <u>SECRETARY</u>	

ISSUED: 07-04-1997

DO NOT TAPE OR STAPLE

11620