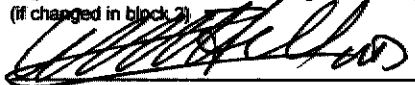
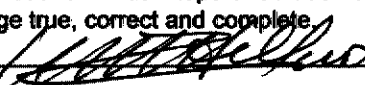


|                                                                                                                                                 |                                                       |                                                                                                                             |                                               |       |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|-------|
| No. 967                                                                                                                                         | Idaho Limited Liability Company Annual Report Form    |                                                                                                                             | 2. Registered Agent and Office NOT A P.O. BOX |       |
| Return To                                                                                                                                       | Due No Later Than November 30, 1995                   |                                                                                                                             | T WILLIAM HILL                                |       |
| Secretary of State<br>700 W Jefferson<br>P.O. Box 83720<br>Boise, ID 83720-0080                                                                 | 1. Mailing Address -- Please Correct If Not Correct   |                                                                                                                             | 324 5TH ST                                    |       |
| * FIRST NOTICE<br>NO FEE REQUIRED                                                                                                               | H & S LIMITED, L.L.C.<br>T WILLIAM HILL<br>324 5TH ST |                                                                                                                             | LEWISTON ID 83501                             |       |
|                                                                                                                                                 | LEWISTON ID 83501                                     |                                                                                                                             | 3. Organized Under The Laws of                |       |
|                                                                                                                                                 |                                                       |                                                                                                                             | ID<br>NO: 967                                 |       |
| 4. Names and Addresses of <input checked="" type="checkbox"/> Managers or <input type="checkbox"/> Members (check one) MUST BE PRINTED OR TYPED |                                                       |                                                                                                                             |                                               |       |
| Name                                                                                                                                            | Street or P.O. Address                                | City                                                                                                                        | State                                         | Zip   |
| T. William Hill                                                                                                                                 | POB 1103                                              | Lewiston                                                                                                                    | Id                                            | 83501 |
| D.S. Solonik                                                                                                                                    | POB 1103                                              | Lewiston,                                                                                                                   | Id                                            | 83501 |
| 5. Signature of the Current Registered Agent<br>(if changed in block 2)                                                                         |                                                       | 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 21 29 95                  |                                               |       |
| Name (Typed or Printed)                                                                                                                         |                                                       | Name (Typed or Printed)                                                                                                     |                                               |       |