

No. C 84954	Annual Report Form 1995 Due No Later Than November 30,		2. Registered Agent and Office NOT A P.O. BOX RUTH M. STEVENS 155 SECOND AVENUE NORTH TWIN FALLS ID 83301
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 RUTH M. STEVENS, C.P.A., P.A. RUTH M. STEVENS 155 SECOND AVENUE NORTH		3. Organized Under the Laws of: ID C 84954
* FIRST NOTICE *	TWIN FALLS ID 83301		
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)			
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u> <u>State</u> <u>Zip</u>
PRESIDENT:	RUTH M. STEVENS	P.O. BOX 394	TWIN FALLS, ID 83303
SECRETARY:	BONNIE J. HARPSTER	P.O. BOX 394	TWIN FALLS, ID 83303
DIRECTORS:	RUTH M. STEVENS	P.O. BOX 394	TWIN FALLS, ID 83303
5. NATURE OF BUSINESS ACCOUNTING		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><i>Bonnie J Harpster</i></u> Date <u>10/10/96</u> Name (Typed or Printed) <u>BONNIE J HARPSTER</u> Title <u>ACC</u>	

ISSUED: 37-36-1995

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