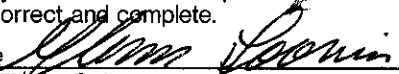
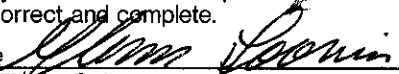
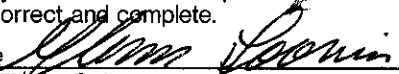


No. 54219 Return To Secretary of State Room 203, Statehouse Boise, ID 83720 NO FEE REQUIRED	Idaho Corporation Annual Report Form <i>Due No Later Than November 1, 1990</i> 1. Mailing Address — Please Correct MOUNTAIN SHADOWS CORPORATIO GLENN LOOMIS P.O. BOX 458 DONNELLY ID 83615	2. Registered Agent and Office FLOYD LOOMIS P. O. BOX 1 DONNELLY ID 83615 3. Incorporated Under The Laws of ID NO: 054219
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4. Names and Addresses of Officers and Directors				
	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u> <u>Zip</u>
President:	Glenn Loomis	P.O.Box 458	Donnelly	Id. 83615
Secretary:	Doris Loomis	"	"	"
Directors:	Viola Loomis	P.O.Box 1	"	"

5. Nature of Business WATER & ROAD MAINTENANCE	6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. <table style="width: 100%;"> <tr> <td style="width: 60%;"> Signature  Name <small>(Type or print)</small> GLENN LOOMIS </td> <td style="width: 40%;"> Date 9/4/90 Title PRES. </td> </tr> </table>	Signature  Name <small>(Type or print)</small> GLENN LOOMIS	Date 9/4/90 Title PRES.
Signature  Name <small>(Type or print)</small> GLENN LOOMIS	Date 9/4/90 Title PRES.		