

No. C 42125

Annual Report Form 1997
Due No Later Than November 30,

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

* FIRST NOTICE *

1. Mailing Address - Please Correct, If Not Correct

TITLEFACTS, INC.
RICHARD B. STIVERS
P.O. BOX 486RICHARD B. STIVERS
163 4TH AVE. N.

TWIN FALLS ID 83301

3. Organized Under the Laws of:

ID C 42125

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors

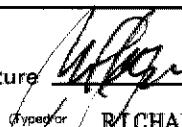
Limited Liability Companies: Enter Names and Addresses of Managers or Members (check one)

Office held	Name	Street or P.O. Address	City	State	Zip
PRESIDENT:	RICHARD B. STIVERS	391 EDWARDS DRIVE	TWIN FALLS	ID	83301
VICE-PRES:	R. TODD BLASS	464 MAHARD DRIVE	TWIN FALLS	ID	83301
SECRETARY:	SUSAN E. WATERS	3168 HIGHLAWN DRIVE	TWIN FALLS	ID	83301
DIRECTORS:	T.W. STIVERS	144 NORTH JUNIPER	TWIN FALLS	ID	83301
	WINIFRED STIVERS	144 NORTH JUNIPER	TWIN FALLS	ID	83301
	SUSAN E. WATERS	3168 LIGHAWN DRIVE	TWIN FALLS	ID	83301
	RICHARD B. STIVERS	391 EDWARDS DRIVE	TWIN FALLS	ID	83301
R. TODD BLASS	464 MAHARD DRIVE	TWIN FALLS	ID	83301	

5. NATURE OF BUSINESS:

TITLE INSURANCE AND RELATED
SERVICES

6.

Signature 

Date 7/11/97

Name (Type or
Printed) RICHARD B. STIVERS

Title PRES.

ISSUED: 07-04-1997

4000

DO NOT TAPE OR STAPLE