

No. C 93675	Annual Report Form Due No Later Than November 30, 1996		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	1. Mailing Address - Please Correct, If Not Correct SOUTHVIEW TERRACE, INC. MARILYN BEACH 4485 N. CLOVERLEAF		MARILYN BEACH 4485 N. CLOVERLEAF POST FALLS ID 83854																									
* FIRST NOTICE *		POST FALLS ID 83854		ID C 90675																								
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)																												
<table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Gary R. Kingstey</td> <td>13249 126th P.O. E.</td> <td>Kirkland</td> <td>Wn.</td> <td>98034</td> </tr> <tr> <td>Secretary</td> <td>Marilyn F. Beach</td> <td>4485 N. Cloverleaf</td> <td>Post Falls</td> <td>Id.</td> <td>83854</td> </tr> <tr> <td colspan="6">Directors Same as above.</td> </tr> </tbody> </table>					Office held	Name	Street or P.O. Address	City	State	Zip	President	Gary R. Kingstey	13249 126th P.O. E.	Kirkland	Wn.	98034	Secretary	Marilyn F. Beach	4485 N. Cloverleaf	Post Falls	Id.	83854	Directors Same as above.					
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5. NATURE OF BUSINESS MOBILE HOME PARK		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>Marilyn Beach</u> Date <u>7-17-96</u> Name (Typed or Printed) <u>Marilyn Beach</u> Title <u>Sec.</u>																										

ISSUED: 07-06-1996

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