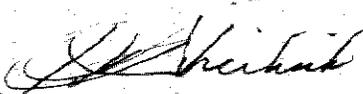
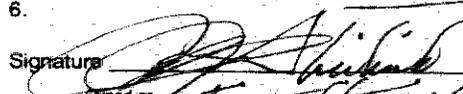


REINSTATEMENT

No. 43082 Return to: SECRETARY OF STATE 700 WEST JEFFERSON P.O. BOX 83720 BOISE, ID 83720-0080 FEE DUE	Annual Report Form 1. Mailing Address - Please Correct, if Not Correct Waterford High Lands, Inc J. J. Streibick PO BOX 556 LEWISTON ID 83501	2. Registered Agent and Office NOT A P.O. BOX JJ STREIBICK 1914 5 th 406 20TH N Ave N PO Box 556 LEWISTON ID 83501 3. Organized Under the Laws of: ID C 107411																														
4. Corporations: Enter Names and Business 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 style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Office Held</th> <th style="width: 30%;">Name</th> <th style="width: 30%;">Street or P.O. Address</th> <th style="width: 10%;">City</th> <th style="width: 10%;">State</th> <th style="width: 10%;">Zip</th> </tr> </thead> <tbody> <tr> <td>President</td> <td>J. J. Streibick</td> <td>Box 556</td> <td>Lewiston</td> <td>ID</td> <td>83501</td> </tr> <tr> <td>Secretary</td> <td>William C. Stollman</td> <td></td> <td>"</td> <td>"</td> <td>"</td> </tr> <tr> <td>Directors</td> <td>J. J. Streibick</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td>William C. Stollman</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>			Office Held	Name	Street or P.O. Address	City	State	Zip	President	J. J. Streibick	Box 556	Lewiston	ID	83501	Secretary	William C. Stollman		"	"	"	Directors	J. J. Streibick						William C. Stollman				
Office Held	Name	Street or P.O. Address	City	State	Zip																											
President	J. J. Streibick	Box 556	Lewiston	ID	83501																											
Secretary	William C. Stollman		"	"	"																											
Directors	J. J. Streibick																															
	William C. Stollman																															
5. Signature of New Registered Agent 	6. Signature  Date 4/15/99 (Typed or Printed) Name J. J. Streibick Title Pres																															

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

- 1.) Please pay special attention to the mailing address. If it is incorrect, please make the appropriate corrections.
NOTE: The name of the business entity cannot be altered on the annual report form.
- 2.) If the registered agent has changed or moved, please make that correction on this form. The registered agent must be found IN IDAHO at a PHYSICAL ADDRESS. PO Boxes WILL NOT be accepted. If report is for a Limited Liability please refer to #4 below.
- 3.) Corporation: Enter names and addresses of ONLY the president, secretary, and directors in block 4.
 Limited Liability Company: Enter the names and addresses of the managers or members in block 4.
NOTE: Putting "same as last year" WILL NOT be accepted.
- 4.) Limited Liability Company: If the registered agent has been changed in block 2, then the NEW registered agent must accept that position by signing in block 5.
- 5.) Corporation: Block 6 must be signed by an officer or chairman of the board of the corporation. Signer must specify his or her title.
 Limited Liability Company: Block 6 must be signed by a manager or member, who must specify his or her title.
- 6.) If new registered Agent, please sign block 5.

IDAHO SECRETARY OF STATE

06/17/1999 09:00
 CK: 2437 CT: 116956 BH: 226678

1 @ 30.00 = 30.00 CORP REINS # 2