C_102916	g	Annual Report Form Due No Later Than November 30,		2. Registered Agent and Office NOT A P.O. BOX JOHN W BEASLEY HC 01 - Box 220 Wallace ID 83873 3. Organized Under the Laws of: C 102916		
turn to: SECRET 105 STATE 100 WEST JEHENS PO BOX 83720 80ISE, ID 83720-0080	EMENT MJB	ng Address - Please Correct, If Not Correct RESCURCES INC. n: John W. Beasley D. Box 412	HC 01 -			
FEE REQ 12/01 eided 12/01 530,00c1		ray ID 83874				
Corporations 5 140	Names and Address panies: Enter Names	ses of President, Secretary and Directors s and Addresses of I Managers or I N	flembers (check one)			
Office held	Name	Street or P.O. Address	<u>City</u>	State	<u>Zip</u>	
President& Director	John W.	Beasley PO Box 412	Murray	ΙD	83874	
Secretary & Director	Patricia	Beasley PO box 412	Murray	ΙD	83874	
		6. I certify that this Annual Report has knowledge true/correct and comp Signature Name (Typed or John W. BE	Date _	8-30-9 reside:	7	