SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  NO FEE REQUIRED  * FIRST NOTICE *  4. Corporations: Enter Names and Actimited Liability Companies: Enter Noffice held  PRESIDENT JOYCE F	Mailing Address - Please Correct, if Not Correct  L C TOURS / INC.  JOYCE H EDWARDS  PO BOX 1455  LEWISTON ID 83501  ddresses of President, Secretary and Directors Names and Addresses of Managers or Men  Street or P.O. Address  H EDWARDS 3040 CLEMANS RD	1128 W LEWIST 3. Organized U ID nbers (check one) City	ON I I	
PO BOX 83720 BOISE, ID 83720-0080  NO FEE REQUIRED  * FIRST NOTICE *  4. Corporations: Enter Names and Actimited Liability Companies: Enter Notice Held  Office held  PRESIDENT  JOYCE F	JOYCE H EDWARDS PO BOX 1455  LEWISTON ID 83501  ddresses of President, Secretary and Directors Names and Addresses of Managers or Men  Street or P.O. Address	3. Organized U  I D  nbers (check one) <u>City</u> -	nder the Laws of:	95213
Corporations: Enter Names and Actimited Liability Companies: Enter No.     Office held Name  PRESIDENT JOYCE H.	ddresses of <b>President, Secretary and Directors</b> Names and Addresses of <b>Managers</b> or <b>Men</b> Street or P.O. Address	nbers (check one)		
Limited Liability Companies: Enter N  Office held Name  PRESIDENT JOYCE F	Names and Addresses of Managers or Men Street or P.O. Address	<u>City</u> -	<u>State</u>	<u>Zip</u>
PRESIDENT JOYCE F	<del></del>	_	State	<u>Zip</u>
	H EDWARDS 3040 CLEMANS RD			
SECRETARY/VP SUSAN		CLARKSTON	WA	99403
	F SCHOENFELDT 1998 LAMBERT	CRT CLARK	rston wa	99403
	1			
5. NATURE OF BUSINESS	6. I certify that this Annual Report has be knowledge true, correct and complete Signature	peen examined by n		-
TRAVEL TOURS	Name (Typed of JOYCE H EDWA	RDS Title	PRESID	ENT
ISSUED: 37-06-199	5		10543	