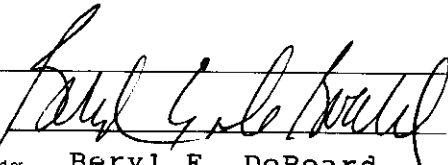


No. W 4470 Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	Due no later than Aug 31, 2000 Annual Report Form 1. Mailing Address - Correct in this box, if applicable SALMON VALLEY INSURANCE, LLC BERYL E DEBOARD 1016 MAIN ST SALMON, ID 83467	2. Registered Agent and Office NO PO BOX BERYL E DEBOARD 1016 MAIN ST SALMON, ID 83467 3. <u>New</u> Registered Agent Signature
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4. Limited Liability Companies: Enter Names and Addresses of Members.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Member	Beryl E. DeBoard	1016 Main St.	Salmon	ID	83467

5. Organized Under the Laws of: <div style="text-align: center;">IDAHO W 4470</div>	6.  Signature _____ Date <u>June 8, 2000</u> Name (Typed or Printed) <u>Beryl E. DeBoard</u> Title: <u>Member</u> <div style="text-align: right;">XXXX</div>
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Issued 06/01/2000

Do Not Tape or Staple

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