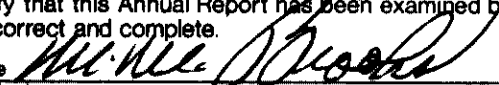
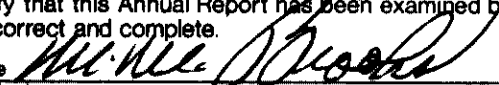
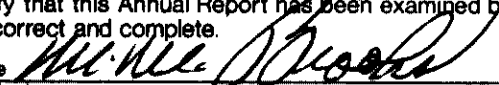


No. 03065	Idaho Corporation Annual Report Form Due No Later Than November 1, 1988		2. Registered Agent and Office																									
Return To Secretary of State Room 203, Statehouse Boise, ID 83720 RECEIVED SEC. OF STATE JUL 13 AM 9 00	1. Mailing Address — Please Correct 03065		M. M. BROOKS 703 NORTH 8TH BOISE, IDAHO 83702																									
	SUMMERS-BROOKS, INC. M. M. BROOKS P. O. BOX 1637 BOISE, IDAHO 83701		3. Incorporated Under The Laws of STATE OF IDAHO																									
4. Names and Addresses of Officers and Directors <table border="1"> <thead> <tr> <th></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President:</td> <td>M. M. BROOKS</td> <td>P.O. BOX 1637</td> <td>BOISE</td> <td>IDAHO</td> <td>83701</td> </tr> <tr> <td>Secretary:</td> <td>MARY H. JETTER</td> <td>P.O. BOX 1637</td> <td>BOISE</td> <td>IDAHO</td> <td>83701</td> </tr> <tr> <td>Directors:</td> <td>MAX EIDEN</td> <td>815 W. WASHINGTON ST.</td> <td>BOISE</td> <td>IDAHO</td> <td>83702</td> </tr> </tbody> </table>						<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President:	M. M. BROOKS	P.O. BOX 1637	BOISE	IDAHO	83701	Secretary:	MARY H. JETTER	P.O. BOX 1637	BOISE	IDAHO	83701	Directors:	MAX EIDEN	815 W. WASHINGTON ST.	BOISE	IDAHO	83702
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5. Nature of Business INSURANCE AGENCY		6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. <table border="0"> <tr> <td>Signature</td> <td></td> <td>Date</td> <td>7/12/88</td> </tr> <tr> <td>Name (Typed or Printed)</td> <td>M. M. BROOKS</td> <td>Title</td> <td>PRES.</td> </tr> </table>			Signature		Date	7/12/88	Name (Typed or Printed)	M. M. BROOKS	Title	PRES.																
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