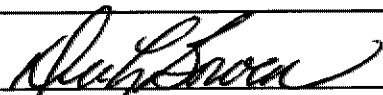


No. <b>W 2091</b>	<b>Annual Report Form</b> 1997 <i>Due No Later Than November 30,</i>	2. Registered Agent and Office NOT A P.O. BOX <b>DEE BOWEN</b> <b>314 W MAIN ST</b>  <b>MIDDLETON ID 83644</b>
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FEE REQUIRED</b>  <b>* FIRST NOTICE *</b>	1. Mailing Address - Please Correct, if Not Correct  <b>HIGHLAND MEADOWS LIMITED COM</b> <b>DEE BOWEN</b> <b>PO BOX 667</b>   <b>MIDDLETON ID 83644</b>	3. Organized Under the Laws of:  <b>ID W 2091</b>
4. Corporations: Enter Names and Business Addresses of <b>President, Secretary and Directors</b> Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> <b>Managers</b> or <input checked="" type="checkbox"/> <b>Members</b> (check one)		
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>
<u>City</u>	<u>State</u>	<u>Zip</u>
<b>CO-MANAGING MEMBER</b>	<b>DEE L. BOWEN</b>	<b>P.O. Box 667</b>
<b>CO-MANAGING MEMBER</b>	<b>SCOTT CHRISTENSEN</b>	<b>11431 W. Hickory Loop Drive</b>
<b>MIDDLETON</b>	<b>IDAHO</b>	<b>83644</b>
<b>BOISE,</b>	<b>IDAHO</b>	<b>83713</b>
5. SIGNATURE OF CURRENT RA		6. Signature  Date _____ Name (Typed or Printed) <b>DEE L. BOWEN</b> Title <b>CO-MANAGING MEMBER</b>

ISSUED: 07-04-1997

( DO NOT TAPE OR STAPLE )

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