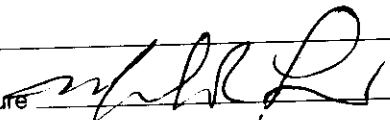
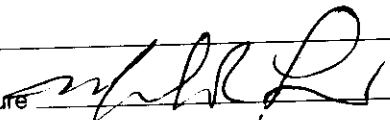
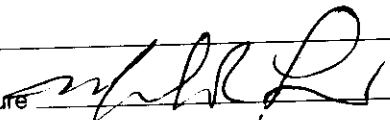


No. C 136086	Due no later than Oct 31, 2001 Annual Report Form	2. Registered Agent and Office NO PO BOX MICHAEL R LARSON 412 E PARKCENTER BLVD BOISE, ID 83706																		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable MICHAEL R. LARSON FINANCIAL ADVISOR MICHAEL R LARSON 412 E PARKCENTER BLVD BOISE, ID 83706	3. <u>New</u> Registered Agent Signature																		
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;"><u>Office held</u></th> <th style="text-align: left;"><u>Name</u></th> <th style="text-align: left;"><u>Street or P.O. Address</u></th> <th style="text-align: left;"><u>City</u></th> <th style="text-align: left;"><u>State</u></th> <th style="text-align: left;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Michael R. Larson</td> <td>412 E. Parkcenter Blvd</td> <td>Boise</td> <td>ID</td> <td>83706</td> </tr> <tr> <td>Director</td> <td>Terrell L. MUSE</td> <td>1905 Montclair Dr</td> <td>Boise</td> <td>ID</td> <td>83702</td> </tr> </tbody> </table>			<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President	Michael R. Larson	412 E. Parkcenter Blvd	Boise	ID	83706	Director	Terrell L. MUSE	1905 Montclair Dr	Boise	ID	83702
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Director	Terrell L. MUSE	1905 Montclair Dr	Boise	ID	83702															
5. Organized Under the Laws of: IDAHO C 136086	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"> Signature  </td> <td style="width: 40%;"> Date <u>8-12-01</u> </td> </tr> <tr> <td> Name (Typed or Printed) <u>Michael R. Larson</u> </td> <td> Title _____ </td> </tr> </table>		Signature 	Date <u>8-12-01</u>	Name (Typed or Printed) <u>Michael R. Larson</u>	Title _____														
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