No. <b>C 109453</b> Return to:		Due no later than Feb 28, 2007  Annual Report Form		2. Registered Agent and Address (NO PO BOX)  KAREN MASON			
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Corporations: Enter Name	s and Busine	ess Addresses of Presid	dent, Secretary, and Directors. Treasurer (	optional).			
Office Held N	lame		Street or PO Address	City	State	Country	Postal Code
PRESIDENT DOUG FAGERNESS SECRETARY EVELYN MASON DIRECTOR HOLLIS BROOKOVER DIRECTOR BEATRICE BLACK		2608 N. 10TH PLACE 600 NORTH CURTIS ROAD SUITE 145 649 N. MORNINGSIDE WAY 2030 N. 23RD STREET	COUER D'ALENE BOISE BOISE BOISE	ID ID ID	USA USA USA USA	83815 83706 83712 83702	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
IDAHO C 109453		Signature: Beatrice Black		Date: 03/10/2007			
		Name (type or print): Beatrice Black		Title: Treasurer			
Processed 03/10/2007		* Electronically provide	ed signatures are accepted as original signa	atures.			