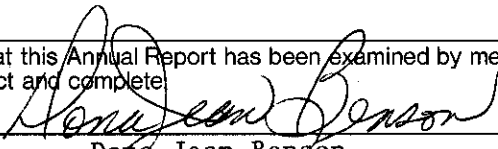
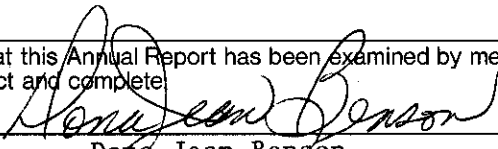
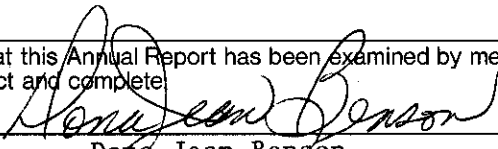


No. 75102	Idaho Corporation Annual Report Form		2. Registered Agent and Office																									
Return To Secretary of State Room 203, Statehouse Boise, ID 83720 NO FEE REQUIRED	Due No Later Than November 1, 1990		A. BRUCE LARSON																									
	1. Mailing Address — Please Correct		241 SOUTH MAIN																									
	WESTERN TITLE, INC. A. BRUCE LARSON 241 SOUTH MAIN SODA SPRINGS ID 83276		SODA SPRINGS ID 83276 23 3. Incorporated Under The Laws of ID NO: 075102																									
4. Names and Addresses of Officers and Directors																												
<table border="0"> <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>A. Bruce Larson</td> <td>P.O.Box 608</td> <td>Soda Springs, Idaho</td> <td>83276</td> <td></td> </tr> <tr> <td>Secretary:</td> <td>Dona Jean Benson</td> <td>P.O. Box 608</td> <td>Soda Springs, Idaho</td> <td>83276</td> <td></td> </tr> <tr> <td>Directors:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>						<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President:	A. Bruce Larson	P.O.Box 608	Soda Springs, Idaho	83276		Secretary:	Dona Jean Benson	P.O. Box 608	Soda Springs, Idaho	83276		Directors:					
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Directors:																												
5. Nature of Business title insurance/escrows		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>July 18, 1990</td> </tr> <tr> <td>Name (Typed or Printed)</td> <td>Dona Jean Benson</td> <td>Title</td> <td>Secretary</td> </tr> </table>			Signature		Date	July 18, 1990	Name (Typed or Printed)	Dona Jean Benson	Title	Secretary																
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