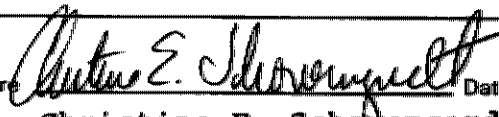


No. W 6872 Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED * FIRST NOTICE *	Annual Report Form 1999 Due No Later Than November 30, 1. Mailing Address - Please Correct, If Not Correct SALMON RIVER RANCHES, LTD. C c/o James R Bennetts 1231 MAIN ST CHALLIS ID 83226		2. Registered Agent and Office NOT A P.O. BOX JAMES R BENNETTS 1231 MAIN ST CHALLIS ID 83226 3. Organized Under the Laws of: ID W 6872																	
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of ☐ Managers or ☒ Members (check one) <table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>Member</td> <td>Richard W. Schowengerdt</td> <td>250 N. Summit Moors Dr.</td> <td>Oconomowoc, WI</td> <td>53066</td> <td></td> </tr> <tr> <td>Member</td> <td>Christine E. Schowengerdt</td> <td>250 N. Summit Moors Dr.</td> <td>Oconomowoc, WI</td> <td>53066</td> <td></td> </tr> </tbody> </table>			Office held	Name	Street or P.O. Address	City	State	Zip	Member	Richard W. Schowengerdt	250 N. Summit Moors Dr.	Oconomowoc, WI	53066		Member	Christine E. Schowengerdt	250 N. Summit Moors Dr.	Oconomowoc, WI	53066	
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5. Signature of New Registered Agent	6.  Signature _____ Date 8/27/99 Name (Typed Printed) Christine E. Schowengerdt Title Member																			

ISSUED: 07-03-1999

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