

No. <b>C111697</b>	<b>Annual Report Form</b> Due No Later Than November 30, <b>1996</b>		2. Registered Agent and Office <b>NOT A P.O. BOX</b>	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FEE REQUIRED</b>	1. Mailing Address - Please Correct, If Not Correct  <b>KINKEADE, INC.</b> <b>TIMOTHY STEPHEN KINKEADE</b> <b>111 E 1ST</b>		<b>TIMOTHY STEPHEN KINKEADE</b> <b>111 E 1ST</b>  <b>MOSCOW</b> ID <b>83843</b>	
* <b>FIRST NOTICE</b> *		<b>MOSCOW</b> ID <b>83843</b>	3. Organized Under the Laws of:  ID <b>C111697</b>	
4. Corporations: Enter Names and Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one)				
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>
<i>President</i>	<i>Timothy S. Kinkeade</i>	<i>1745 Lamon Ln</i>	<i>Moscow</i>	<i>ID 83843</i>
5.  <b>NATURE OF BUSINESS</b>  <b>MORTGAGE BROKER</b>	6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.  Signature <u><i>[Signature]</i></u> Date <u><i>7/24/96</i></u>  Name (Typed or Printed) <u><i>Tim Kinkeade</i></u> Title <u><i>Pres.</i></u>			

ISSUED: 07-06-1996

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