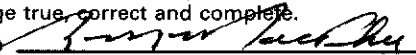


No. C 62115	Annual Report Form Due No Later Than November 30, 1996	2. Registered Agent and Office NOT A P.O. BOX R.M. MACPHEE BOX 469, SCOTT BLDG. WALLACE ID 83873
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED	1. Mailing Address - Please Correct, If Not Correct JAMESON, INC. R. M. MACPHEE P.O. BOX 469	3. Organized Under the Laws of: ID
* FIRST NOTICE *		
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>	<u>Zip</u>
President	H. F. Magnuson	Box 469
Secretary	R. M. MacPhee	Box 252
Director	H. F. Magnuson	Box 469
Director	R. M. MacPhee	Box 252
Director	H. James Magnuson	Box 2288
		Wallace ID 83873
		Kellogg ID 83837
		Wallace ID 83873
		Kellogg ID 83837
		Coeur d'Alene ID 83814
5. NATURE OF BUSINESS RESTAURANT		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></u> Date <u>8-1-96</u> Name (Typed or Printed) <u>R. M. MacPhee</u> Title <u>Secretary</u>

ISSUED: 07-06-1996

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