Due No Later Than . Mailing Address — Plu		2. Registered Agent ar MELVIN WOOD 8833 TAMARAC SAGLE 3. Incorporated Under of ID	K DR	83860
Mailing Address — Ph TAMARACK ESTA XEN WILLIAMS 212 NORTH 4Th	TES WATER ASSOCIAT AVENUE #131	SAGLE 3. Incorporated Under	K DR	8386D
TAMARACK ESTA XEN WILLIAMS 212 NORTH 4Th	TES WATER ASSOCIAT	SAGLE 3. Incorporated Under	\ ID	83860
XEN WILLIAMS 212 NORTH 4Th	AVENUE #131	3. Incorporated Under		83860
		1	The Laws	
SANDPOINT	ID 83864	of ID		
	and the same of the same of	NO: 86839		
and Directors	MUST BE PRINTED 0	I R.:TYRED		<u> </u>
Name	Street or P.O. Address	<u>City</u>	State	Zip
870	& Tanarack Dr	Soole	KO.	83860
			\d	83860
6. I certify that	this Annual Report has been exan	nined by me and is to the	e best of my	knowledge
				- 1 ·
Signature Name Printed	rane DAVIES			
	6. I certify that true, correct Signature	6. I certify that this Annual Report has been exant true, correct and complete. Signature	6. I certify that this Annual Report has been examined by me and is to the true, correct and complete. Signature Davies Date Mannual Printed Date Manne Printed Day 10 Au 10 Title S	6. I certify that this Annual Report has been examined by me and is to the best of my true, correct and complete. Signature Across Date 10-18-9 Name (Typed & Diane Davies Title Secreta)

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