

No. W 2379	Annual Report Form Due No Later Than November 30, 1998	Registered Agent and Office NOT A P.O. BOX
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 HIGHLANDS PARK LIMITED COMPA CHRIS T RIFFE PO BOX 409	CHRIS T RIFFE 712 LAKEVIEW HOPE ID 83836
** FINAL NOTICE **	HOPE ID 83836	3. Organized Under the Laws of: ID W 2379

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)

Office held	Name	Street or P.O. Address	City	State	Zip
member	Christopher T Riffe	PO Box 409 / 712 Lakeview	Hope	ID	83836
member	Norman Riffe	1300 Red Fir Rd	Hope	ID	83836
member	Larry Riffe	300 Hwy 200 E.	Sandpoint	ID	83864

5. Signature of New Registered Agent	6.
	Signature <u>Christopher T Riffe</u> Date <u>11/25/98</u>
	Name (Typed or Printed) <u>Christopher T. Riffe</u> Title <u>member. Agent</u>

ISSUED: 10-03-1998

DO NOT TAPE OR STAPLE

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