

No. <b>C 94394</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>PEND OREILLE VALLEY SPORTSMA          JOHN CAMPBELL          BOX 1514</b>		<b>JOHN CAMPBELL          N 307 STATE</b>  <b>OLDTOWN ID 83822</b>  3. Organized Under the Laws of:  <b>ID C 94394</b>																			
4. Corporations: Enter Names and Addresses of <b>President, Secretary and Directors</b> Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> <b>Managers</b> or <input type="checkbox"/> <b>Members</b> (check one)  <table border="0"> <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>Pres</td> <td>John Campbell</td> <td>Box 1514</td> <td>Oldtown</td> <td>Id</td> <td>83822</td> </tr> <tr> <td>Sec/tes</td> <td>Tina Campbell</td> <td>Oldtown, Id</td> <td></td> <td></td> <td>83822</td> </tr> </tbody> </table>					Office held	Name	Street or P.O. Address	City	State	Zip	Pres	John Campbell	Box 1514	Oldtown	Id	83822	Sec/tes	Tina Campbell	Oldtown, Id			83822
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5. <b>NATURE OF BUSINESS</b>  <b>SPORTING GOODS</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>John Campbell</u> Date <u>7-31-96</u> Name (Typed or Printed) <u>John Campbell</u> Title <u>Pres</u>																					

ISSUED: 07-06-1996

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