Name (Typed or Printed)	W. WALKER	Title: OWNER TXXX ANAGER
Signature	y W. Walke	Ler Date 2-13-200
6.		
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Due no later than May 31, 2001 Annual Report Form

1. Mailing Address - Correct in this box, if applicable

2. Registered Agent and Office NO PO BOX

RAY W WALKER

No.

Return to:

W 11929

SECRETARY OF STATE