No. (11+1)	Annual Report Form		d Office NOT A P.O. BOX
SECRETARY OF SEATER A TOTAL	ailing Address - Please Correct, If Not Correct LCS_ALAMITOS_SUBDIVISION_HOM	4550 W ST	
PO B (7) 18720	MARTY SULDSAITH 4500 W STATE ST	POISE	ID 83703
NO FEE REQUIRED 111 3		3. Organized Under th	e Laws of:
** MINAL NOTICE **	enise	Ιΰ	C114987
<ol> <li>Corporations: Enter Names and Add Limited Liability Companies: Enter Na</li> </ol>	dresses of President, Secretary and Directors ames and Addresses of   Managers or  Members	(check one)	
Office held Name	Street or P.O. Address	City	State Zip
Overtor Marty Gold	smith 4550 W. Stati	Bosse	1D 83702
nevertor Bradomina	smith 4550 W. State year 280 E. Corporate 1 Coll 420 Washington E	Mindsan	In 62/1/1
per eero. In the processing the	1.1	7	0 00042
Director Brian MC	! (all 420 Washington t	561 <b>s</b> e 11	) 83702
	J		
5. NATURE OF BUSINESS	I certify that this Annual Report has been knowledge true, correct and complete.		
	Signature Marter Golden	Date /	1-26-96
MAINTAIN COMMON A	May July and the	146	
	Name (Typed or Marty Foldsm	Title	lun Evector)
ISSUED: 10-05-199	0		<del>563 •</del>
	CONTROL TO A P. C.	- 10 A 100	
			G. C.
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