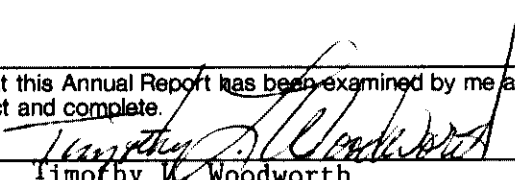
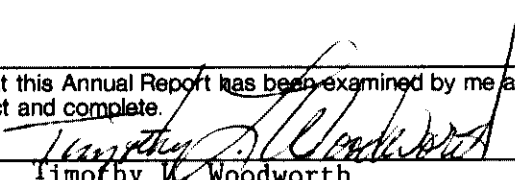
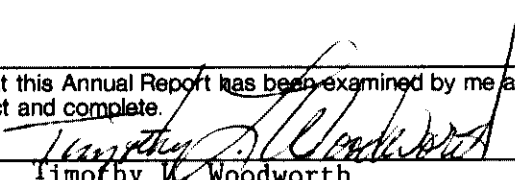


| No. 77419   | Idaho Corporation Annual Report Form   |  | 2. Registered Agent and Office   |       |           |  |                        |         |                         |                      |            |                |                       |             |     |       |            |                 |                  |           |     |       |            |  |  |  |  |  |
|---|--|--|--|-------|-----------|--|------------------------|---------|-------------------------|----------------------|------------|----------------|-----------------------|-------------|-----|-------|------------|-----------------|------------------|-----------|-----|-------|------------|--|--|--|--|--|
| Return To<br><br>Secretary of State<br>Room 203, Statehouse<br>Boise, ID 83720<br><br>REC'D<br>SEC. OF STATE<br><br>38 AUG 18 AM 8 59   | Due No Later Than November 1, 1986   |  | TIMOTHY L. WOODWORTH<br>504 MAIN<br>LEWISTON, IDAHO<br>83501                       |       |           |  |                        |         |                         |                      |            |                |                       |             |     |       |            |                 |                  |           |     |       |            |  |  |  |  |  |
|   | 1. Mailing Address — Please Correct 077419<br><br>WOODCOM, INC.<br>ALTON D. WOODWORTH<br>W. 407 NORTSHORE<br>MOSES LAKE, WASHINGTON<br>98837 |  |  |       |           |  |                        |         |                         |                      |            |                |                       |             |     |       |            |                 |                  |           |     |       |            |  |  |  |  |  |
|   | 4. Names and Addresses of Officers and Directors   |  | 3. Incorporated Under The Laws of<br>ENTERED<br>AUG 18 1986<br>STATE OF WASHINGTON |       |           |  |                        |         |                         |                      |            |                |                       |             |     |       |            |                 |                  |           |     |       |            |  |  |  |  |  |
| <table border="1"> <thead> <tr> <th></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>President:</td> <td>A.D. WOODWORTH</td> <td>W. 407 Northshore Dr.</td> <td>Moses Lake,</td> <td>WA.</td> <td>98837</td> </tr> <tr> <td>Secretary:</td> <td>T. L. WOODWORTH</td> <td>2841 Mayfair Dr.</td> <td>Lewiston,</td> <td>ID.</td> <td>83501</td> </tr> <tr> <td>Directors:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table> |  |  |  |       |           | Name   | Street or P.O. Address | City    | State                   | Zip                  | President: | A.D. WOODWORTH | W. 407 Northshore Dr. | Moses Lake, | WA. | 98837 | Secretary: | T. L. WOODWORTH | 2841 Mayfair Dr. | Lewiston, | ID. | 83501 | Directors: |  |  |  |  |  |
|   | Name   | Street or P.O. Address   | City   | State | Zip       |  |                        |         |                         |                      |            |                |                       |             |     |       |            |                 |                  |           |     |       |            |  |  |  |  |  |
| President:  | A.D. WOODWORTH   | W. 407 Northshore Dr.  | Moses Lake,  | WA.   | 98837     |  |                        |         |                         |                      |            |                |                       |             |     |       |            |                 |                  |           |     |       |            |  |  |  |  |  |
| Secretary:  | T. L. WOODWORTH  | 2841 Mayfair Dr.   | Lewiston,  | ID.   | 83501     |  |                        |         |                         |                      |            |                |                       |             |     |       |            |                 |                  |           |     |       |            |  |  |  |  |  |
| Directors:  |  |  |  |       |           |  |                        |         |                         |                      |            |                |                       |             |     |       |            |                 |                  |           |     |       |            |  |  |  |  |  |
| 5. Nature of Business<br><br>Radio Station  |  | 6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.<br><br><table border="0"> <tr> <td>Signature</td> <td></td> <td>Date</td> <td>8/16/88</td> </tr> <tr> <td>Name (Typed or Printed)</td> <td>Timothy L. Woodworth</td> <td>Title</td> <td>Sec.</td> </tr> </table> |  |       | Signature |  | Date                   | 8/16/88 | Name (Typed or Printed) | Timothy L. Woodworth | Title      | Sec.           |                       |             |     |       |            |                 |                  |           |     |       |            |  |  |  |  |  |
| Signature   |    | Date   | 8/16/88  |       |           |  |                        |         |                         |                      |            |                |                       |             |     |       |            |                 |                  |           |     |       |            |  |  |  |  |  |
| Name (Typed or Printed)   | Timothy L. Woodworth   | Title  | Sec.   |       |           |  |                        |         |                         |                      |            |                |                       |             |     |       |            |                 |                  |           |     |       |            |  |  |  |  |  |