

INSTRUCTIONS ON REVERSE SIDE

No. 54219	Idaho Corporation Annual Report Form Due No Later Than November 1, 1993	2. Registered Agent and Office NOT A P.O. BOX GLENN LOOMIS P. O. BOX 458
Return To Secretary of State Room 203, Statehouse Boise, ID 83720 ** FINAL NOTICE ** NO FEE REQUIRED	1. Mailing Address - Please Correct, If Not Correct MOUNTAIN SHADOWS CORPORATION (T GLENN LOOMIS P.O. BOX 458 DONNELLY ID 83615	DONNELLY ID 83615 3. Incorporated Under The Laws of ID NO: 54219

4. Names and Addresses of Officers and Directors		MUST BE PRINTED OR TYPED			
	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President:	Glenn Loomis	P.O. Box 458	Donnelly	ID.	83615
Secretary:	Doris Loomis	" "	"	"	"
Directors:	John Deery	4905 Hillside Ave.	Boise	"	83703

5. Nature of Business . . Water and Road Maintenance	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>Doris Loomis</u> Date <u>10/29/93</u> Name (Typed or Printed) <u>Doris Loomis</u> Title <u>Secretary</u>
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