No. C105902	Annual Report Form Due No Later Than November 30,	1999	2. Registered Age	ent and Office N	OT A P.O. BOX
Return to: SECRETARY OF STATE	1. Mailing Address - Please Correct, If Not Correct	į		TH BADE LIPS CR	R AND JULI
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED	HEADWATERS RIVER COMPANY PO BOX 1	į	BANKS 3. Organized Uni	I	
** FINAL NOTICE ** 4. Corporations: Enter Names and	Business Addresses of President, Secretary and Dir	>			05902
Office held Name	Street or P.O. Address	~	City	State	Zin
Storekry Elizabet	h Badar Y.U BOX 1	þ	auks auks	エン	83602 83602
Presisee Julie Be	hBader P.O. Box 1 ppu P.O. Box 1 beth Bader	B	whe's	JD	83602
directors Eliza	beth Badur				
Julie	Beppu				
5. New Registered Agent Sign		ppu	Date	11/1/99	
	Name Protection Ville To	ppu.	Title	Pris	
ISSUED: 10-01-	1999			4729	***
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