

INSTRUCTIONS ON REVERSE SIDE

No. 48105	Idaho Corporation Annual Report Form	2. Registered Agent and Office NOT A P.O. BOX WILLIAM J. BOWMAN <i>A.L. Bowman</i>
Return To	Due No Later Than November 30, 1995 Mailing Address - Please Correct if Not Correct	323 CEDAR STREET 1050 Blue Grass Rd
Secretary of State 700 W Jefferson P.O. Box 83720 Boise, ID 83720-0080 * FIRST NOTICE * NO FEE REQUIRED	BOWMAN'S RESTAURANT, INC. W.M. J. BOWMAN <i>A. Lorraine Bowman</i> P. O. BOX 425 1108 SANDPOINT ID 83864	SANDPOINT ID 83864 <i>83860</i> 3. Incorporated Under The Laws of ID NO: 48105

4. Names and Addresses of Officers and Directors

Name	Street or P.O. Address	City	State	Postal Code
President:	<i>A.L. Bowman</i>	<i>P.O. Box 1108</i>	<i>Sandpoint</i>	<i>ID 83864</i>
Secretary:	<i>Teresa Blankenship</i>	<i>P.O. Box 1108</i>	<i>Sandpoint</i>	<i>ID 83864</i>
Directors:	<i>same</i>			

5. Nature of Business <i>Leasing Hotel & Restaurant operation</i>	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 <i>A. Lorraine Bowman</i> Date <i>7-28-95</i> Name (Typed or Printed) <i>A. Lorraine Bowman</i> Title <i>PRES.</i>
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