

July 23, 1997

Debra Ruggles
TRANSPORTATION SYSTEMS, MANAGEMENT C86149
300 S Ave A
Boise ID 83702

RE: TRANSPORTATION SYSTEMS, MANAGEMENT C86149

Greetings:

Please find enclosed your recently submitted annual report for the 1997-1998 fiscal year. We are unable to accept it in its present form. Please make the following correction(s) and return to this office.

Please be certain that the names and addresses of the **officers** in block 4 are complete. (A notation that the information is the same as last year will not be accepted.) After completing that block, resubmit the annual report to this office. Transportation Systems Management is a corporation and not a Limited Liability Company.

If you have any questions or need further assistance, please do not hesitate to contact this office at (208) 332-2811.

Very truly yours,



Sheryl DeVries
Corporate Division

Enclosures: cited

No. C 86149	Annual Report Form 1997 Due No Later Than November 30,		2. Registered Agent and Office NOT A P.O. BOX													
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED * FIRST NOTICE *	1. Mailing Address - Please Correct, If Not Correct TRANSPORTATION SYSTEMS MANAG DEBRA RUGGLES 300 S AVENUE A BOISE ID 83702		DEBRA RUGGLES Lewis May 300 SOUTH AVENUE A BOISE ID 83702 3. Organized Under the Laws of: ID C 86149													
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input checked="" type="checkbox"/> Managers or <input type="checkbox"/> Members (check one) <table border="0"> <tr> <td><u>Office held</u></td> <td><u>Name</u></td> <td><u>Street or P.O. Address</u></td> <td><u>City</u></td> <td><u>State</u></td> <td><u>Zip</u></td> </tr> <tr> <td colspan="2">General Manager, Lewis May</td> <td>Same</td> <td colspan="3"></td> </tr> </table>					<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	General Manager, Lewis May		Same			
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>											
General Manager, Lewis May		Same														
5.		6. Signature <u>Lewis May</u> Date <u>7/21/97</u> Name (Typed or Printed) <u>LEWIS MAY</u> Title <u>General Manager</u>														

ISSUED

-04-1997

↓ DO NOT TAPE OR STAPLE ↓

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