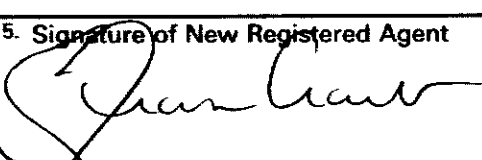
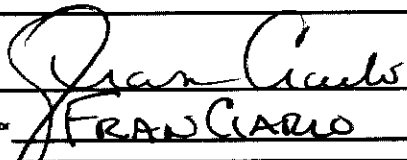


No. C 95227	Annual Report Form Due No Later Than November 30, 1999		2. Registered Agent and Office NOT A P.O. BOX BARBARA PAULSON 4511 SUNNYSIDE BENCH FRANCISCO 330 N ST 83544 LENORE OROFINO ID 83541	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED	1. Mailing Address: Please Correct if Not Correct OROFINO REGIONAL COUNCIL ON PO BOX 173 OROFINO ID 83544 0173		3. Organized Under the Laws of: ID C 95227	
* FIRST NOTICE *				
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one)				
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u> <u>Zip</u>
President	Francisco	PO Box 1117	Orofino	ID 83544
SECRETARY	JO SHARRAI	P.O. Box 443	OROFINO	ID 83544
5. Signature of New Registered Agent 		6. Signature  Date <u>10-5-79</u> Name (Typed or Printed) <u>FRANCISCO</u> Title <u>PRESIDENT</u>		

ISSUED: 07-03-1999

12976