

No. <u>W 1355</u>	Annual Report Form <i>Due No Later Than November 30, 1996</i>		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	1. Mailing Address - Please Correct, If Not Correct <u>N & S TRAINING STABLES, LLC</u> <u>LEONARD E WARD</u> <u>145 GAMBLE AVE</u>		<u>LEONARD E WARD</u> <u>145 GAMBLE AVE</u> <u>PRESTON</u> ID <u>83263</u> 3. Organized Under the Laws of: <u>ID</u> <u>W 1355</u>													
4. Corporations: Enter Names and 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"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td><u>Manager</u></td> <td><u>LEONARD E. WARD</u></td> <td><u>145 Gamble Ave</u></td> <td><u>Preston</u></td> <td><u>ID</u></td> <td><u>83263</u></td> </tr> </tbody> </table>					<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	<u>Manager</u>	<u>LEONARD E. WARD</u>	<u>145 Gamble Ave</u>	<u>Preston</u>	<u>ID</u>	<u>83263</u>
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5. SIGNATURE OF CURRENT RA _____	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><i>Leonard E. Ward</i></u> Date <u>10/26/96</u> Name (Typed or Printed) <u>LEONARD E. WARD</u> Title <u>Managers Member</u>															

ISSUED: 07-08-1995

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