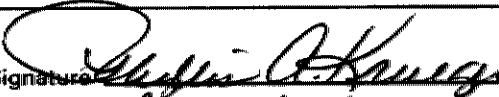


| No. C108527                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <b>Annual Report Form</b> 1999<br>Due No Later Than November 30,                                                                                                                     |                                                                                                                                                                                    | 2. Registered Agent and Office <b>NOT A P.O. BOX</b>                                                                                                |       |             |      |                        |      |       |     |       |                    |              |          |    |       |      |       |     |     |     |     |          |                  |     |     |     |     |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|-------|-------------|------|------------------------|------|-------|-----|-------|--------------------|--------------|----------|----|-------|------|-------|-----|-----|-----|-----|----------|------------------|-----|-----|-----|-----|
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FEE REQUIRED</b><br><br><b>* FIRST NOTICE *</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 1. Mailing Address - Please Correct, If Not Correct<br><br>KRUEGER'S NORTH & SOUTH RV,<br>TERI KELLER<br><del>1144 N ELK RIVER WAY</del><br><b>413 MANGO DRIVE</b><br>EAGLE ID 83616 |                                                                                                                                                                                    | TERI KELLER<br><del>1144 N ELK RIVER WAY</del><br><b>413 MANGO DRIVE</b><br>EAGLE ID 83616<br><br>3. Organized Under the Laws of:<br><br>ID C108527 |       |             |      |                        |      |       |     |       |                    |              |          |    |       |      |       |     |     |     |     |          |                  |     |     |     |     |
| 4. Corporations: Enter Names and <u>Business</u> Addresses of <b>President, Secretary and Directors</b><br>Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> <b>Managers</b> or <input type="checkbox"/> <b>Members</b> (check one) <table border="1" data-bbox="16 373 1462 692"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>Pres.</td> <td>Phyllis A. Krueger</td> <td>4040 N 5 Hwy</td> <td>Lewiston</td> <td>ID</td> <td>83501</td> </tr> <tr> <td>Sec.</td> <td>" " "</td> <td>" "</td> <td>" "</td> <td>" "</td> <td>" "</td> </tr> <tr> <td>Director</td> <td>RONALD E Krueger</td> <td>" "</td> <td>" "</td> <td>" "</td> <td>" "</td> </tr> </tbody> </table> |                                                                                                                                                                                      |                                                                                                                                                                                    |                                                                                                                                                     |       | Office held | Name | Street or P.O. Address | City | State | Zip | Pres. | Phyllis A. Krueger | 4040 N 5 Hwy | Lewiston | ID | 83501 | Sec. | " " " | " " | " " | " " | " " | Director | RONALD E Krueger | " " | " " | " " | " " |
| Office held                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Name                                                                                                                                                                                 | Street or P.O. Address                                                                                                                                                             | City                                                                                                                                                | State | Zip         |      |                        |      |       |     |       |                    |              |          |    |       |      |       |     |     |     |     |          |                  |     |     |     |     |
| Pres.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Phyllis A. Krueger                                                                                                                                                                   | 4040 N 5 Hwy                                                                                                                                                                       | Lewiston                                                                                                                                            | ID    | 83501       |      |                        |      |       |     |       |                    |              |          |    |       |      |       |     |     |     |     |          |                  |     |     |     |     |
| Sec.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | " " "                                                                                                                                                                                | " "                                                                                                                                                                                | " "                                                                                                                                                 | " "   | " "         |      |                        |      |       |     |       |                    |              |          |    |       |      |       |     |     |     |     |          |                  |     |     |     |     |
| Director                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | RONALD E Krueger                                                                                                                                                                     | " "                                                                                                                                                                                | " "                                                                                                                                                 | " "   | " "         |      |                        |      |       |     |       |                    |              |          |    |       |      |       |     |     |     |     |          |                  |     |     |     |     |
| 5. Signature of New Registered Agent                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                      | 6. <br>Signature: _____ Date: 8/3/99<br>Name (Typed or Printed): Phyllis A. Krueger Title: Pres. |                                                                                                                                                     |       |             |      |                        |      |       |     |       |                    |              |          |    |       |      |       |     |     |     |     |          |                  |     |     |     |     |

ISSUED: 07-03-1999

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