

No. 56554 A	Idaho Corporation Annual Report Form	2. Registered Agent and Office NOT A P.O. BOX
Return To REINSTATEMENT Secretary of State Room 203, Statehouse Boise, ID 83720 SEC. OF STATE NO FEE REQUIRED	Due No Later Than November 1992	
	1. Mailing Address — Please Correct, If Not Correct	LITA WEST 111 SPUR
	ELLWOOD CORPORATION LITA WEST P.O. BOX 867	KETCHUM ID 83340 0000
31 BELLEVUE ID 83313 0000	3. Incorporated Under The Laws of ID	NO: 56554 A

4. Names and Addresses of Officers and Directors				
Name	Street or P.O. Address	City	State	Zip
President: LITA WEST	PO BOX 867	BELLEVUE	IDAHO	83313
Secretary: BOB GROVES	116 DRY CREEK RD	CAREY	IDAHO	83320
Directors:				

1600 telephone

5. Nature of Business <i>Agriculture/land management</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>Lita W. West</i> Date <i>Nov 1, 1992</i> Name (Typed or Printed) _____ Title <i>President</i>
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