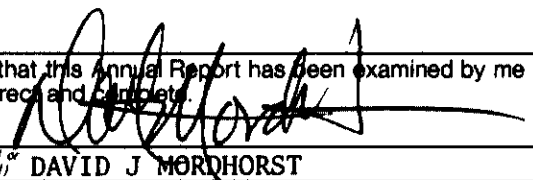


No. 076353 Return To Secretary of State Room 203, Statehouse Boise, ID 83720 SEC. OF STATE 88 JUL 14 PM 2:38	Idaho Corporation Annual Report Form <i>Due No Later Than November 1, 1988</i> 1. Mailing Address — Please Correct 076353 NORTHWEST SECURITIES & INSURANCE GREGORY S. MCDONALD P. O. BOX 6 TWIN FALLS, IDAHO 83301	2. Registered Agent and Office GREGORY S. MCDONALD 2536 KIMBERLY ROAD TWIN FALLS, IDAHO 83301 3. Incorporated Under The Laws of STATE OF IDAHO																																				
4. Names and Addresses of Officers and Directors																																						
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 35%;"></th> <th style="width: 30%; text-align: center;"><u>Name</u></th> <th style="width: 30%; text-align: center;"><u>Street or P.O. Address</u></th> <th style="width: 10%; text-align: center;"><u>City</u></th> <th style="width: 10%; text-align: center;"><u>State</u></th> <th style="width: 10%; text-align: center;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President:</td> <td>GREGORY S MCDONALD</td> <td>ROUTE 1</td> <td>EDEN</td> <td>ID</td> <td>83325</td> </tr> <tr> <td>Secretary:</td> <td>DAVID J MORDHORST</td> <td>749 CAMPUS</td> <td>TWIN FALLS</td> <td>ID</td> <td>83301</td> </tr> <tr> <td>Directors:</td> <td>DELMER G MCNARY</td> <td>693 LOMAX</td> <td>IDAHO FALLS</td> <td>ID</td> <td>83401</td> </tr> <tr> <td></td> <td>DANNY C KARREN</td> <td>300 N 207 E</td> <td>JEROME</td> <td>ID</td> <td>83338</td> </tr> <tr> <td></td> <td>LARRY E STUMPF</td> <td>575 GOLF COURSE RD</td> <td>JEROME</td> <td>ID</td> <td>83338</td> </tr> </tbody> </table>				<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President:	GREGORY S MCDONALD	ROUTE 1	EDEN	ID	83325	Secretary:	DAVID J MORDHORST	749 CAMPUS	TWIN FALLS	ID	83301	Directors:	DELMER G MCNARY	693 LOMAX	IDAHO FALLS	ID	83401		DANNY C KARREN	300 N 207 E	JEROME	ID	83338		LARRY E STUMPF	575 GOLF COURSE RD	JEROME	ID	83338
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5. Nature of Business INSURANCE AGENCY	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 Name (Typed or Printed) DAVID J MORDHORST Date 7-13-88 Title VP-GENERAL MANAGER																																					