No. W 7062,	Due no later than Oct 31, 2000	
Return to: .	Annual Report Form 2. Registered Agent and	d Office NO PO BOX
SECRETARY OF STATE	1. Mailing Address - Correct in this I MICHAEL BURNS	
700 WEST JEFFERSON	PRIVATE RESIDENCE RESORTS TTO Applicable 620 SUN VALLEY RO	OAD
PO BOX 83720	WICHAEL BURNS	
BOISE, ID 83720-0080	POB 90-211 KETCHUM, ID 83340	0
NO FILING FEE IF	SUN VALLEY, ID 83353 3. New Registered Agen	
RECEIVED BY DUE DATE	3. New Registered Agen	nt Signature
4. I imited Liability Compa		
Lantited Liability Compa	nies: Enter Names and Addresses of Members.	
Office held Name	Street or P.O. Address	
	- No. Address	i
Mara Mich		Zip
Municipal Michael	rel POROX 90-11	<u>Zip</u>
Margaring Mich	rel PUBOX 90-211	<u>Zip</u>
Marian Mich	rel POROX 90-11	<u>Zip</u>
Maria Michael Bu	rel PUBOX 90-211	<u>Zip</u>
Maria Michael Bu	rel PUBOX 90-211	<u>Zip</u>
Maraina Michael Bu	rel PUBOX 90-211	<u>Zip</u>
Marana Michael Bu	rel PUBOX 90-211	<u>Zip</u>
Mariana Michael Bu	rel PUBOX 90-211	<u>Zip</u>
WA BU	rel PUBOX 90-211	<u>Zip</u>
5. Organized Under the Laws of:	rel PUBOX 90-211	<u>Zip</u>
5. Organized Under the Laws of:	orns Sun Valley ID 83353	<u>Zip</u>
5. Organized Under the Laws of:	Signature Lul Call Date 14/2	Zip
5. Organized Under the Laws of:	16. Signature Jul Call Date 14/2 Name (Typed or The Call Date 14/2	fou
5. Organized Under the Laws of:	16. Signature Jul Call Date 14/2 Name (Typed or The Call Date 14/2	Low no may