

No. C 78263	Annual Report Form Due No Later Than November 30, 1996		2. Registered Agent and Office NOT A P.O. BOX EDWARD A. LAWSON 319 WALNUT AVENUE KETCHUM ID 83340																			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED * FIRST NOTICE *	1. Mailing Address - Please Correct, If Not Correct		3. Organized Under the Laws of: ID C 78268																			
	RIVER RUN GALLERY, INC. CLAUDIA V. MCCAIN P. O. BOX 1293 KETCHUM ID 83340																					
4. Corporations: Enter Names and Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one)																						
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 15%;">Office held</th> <th style="text-align: left; width: 25%;">Name</th> <th style="text-align: left; width: 30%;">Street or P.O. Address</th> <th style="text-align: left; width: 15%;">City</th> <th style="text-align: left; width: 10%;">State</th> <th style="text-align: left; width: 10%;">Zip</th> </tr> </thead> <tbody> <tr> <td>President</td> <td>CLAUDIA MCCAIN</td> <td>P.O. 1436</td> <td>KETCHUM</td> <td>ID</td> <td>83340</td> </tr> <tr> <td>VP/Sec</td> <td>CONNIE HEDDENS</td> <td>P.O. 491</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>					Office held	Name	Street or P.O. Address	City	State	Zip	President	CLAUDIA MCCAIN	P.O. 1436	KETCHUM	ID	83340	VP/Sec	CONNIE HEDDENS	P.O. 491			
Office held	Name	Street or P.O. Address	City	State	Zip																	
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VP/Sec	CONNIE HEDDENS	P.O. 491																				
5. NATURE OF BUSINESS ART GALLERY		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>CLAUDIA V. MCCAIN</u> Date <u>7-19-96</u> Name (Typed or Printed) <u>CLAUDIA V. MCCAIN</u> Title <u>Pres</u>																				

ISSUED: 07-06-1996

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