	Annual Report Form Due No Later Than November 30.	2. Registered Agent and Office NOT A P.O. BOX
Return to:	Mailing Address - Please Correct, If Not Correct	EDWARD F ANDERSON
SECRETARY OF STATE 700 WEST JEFFERSON	WI / L.L.C.	3623 HILLCREST CIRCLE
PO BOX 83720		COEUR D ALEN ID 83814
BOISE, ID 83720-0080	1424 SHERMAN AVE STE 200	1020K 2 KEEN 10 03014
NO FEE REQUIRED		3. Organized Under the Laws of:
* FIRST WOTICE *	COEUR D ALENE ID 83814	W4 W 1421
Corporations: Enter Names and	Addresses of President, Secretary and Directors	
Limited Liability Companies: Ent	er Names and Addresses of O Managers or O Members	(check one)
Office held Name	Street or P.O. Address	City State Zip
Manager Edwar	d F. Anderson 3623 Hillcrest a	is concert of Alexa PA
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SIGNATURE DE CHAR	NT PA 6. I certify that this Annual Report has been e	examined by me and is to the boot of my
SIGNATURE OF CURRE	knowledge true, correct and complete.	examined by me and is to the best of my
	ENT RA 6. I certify that this Annual Report has been e knowledge true, correct and complete. Signature	examined by me and is to the best of my Date 7-30-96
SIGNATURE OF CURRE	knowledge true, correct and complete. Signature	Date
	knowledge true, correct and complete.	Date
	knowledge true, correct and complete. Signature	Date
SIGNATURE OF CURRE	knowledge true, correct and complete. Signature	Date
	knowledge true, correct and complete. Signature	Date
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