		al Report Form 1 ater Than November 30,	9 5 2. Registered Ager		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED	1. Mailing Address - Ple	THOMAS M.D. P	1200 GAI	V THOMA RRITY BL	VD.
* FINAL NOTICE **			3. Organized Unde	er the Laws of:	
	NAMPA	ID 83687	ID	ial	6243
Corporations: Enter Names and Limited Liability Companies: Enter Name  Office held Name  MANAGER RICHARD	er Names and Addresses		ombers (check one) <u>City</u> NAMPA	State ID	Zip 83687
	,		MAINTA		33681
					į
Signature of New Registered	Agent 6. Signatur	re Mary Jon	Date_	11-30-98	77.71
Signature of New Registered	Signatu	re Mary Lou Deck	Slecker Date -	11-30-98 BOOKKBED	ER