

No. <u>W 1969</u>	Annual Report Form <i>Due No Later Than November 30, 1996</i>		2. Registered Agent and Office NOT A P.O. BOX												
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED	1. Mailing Address - Please Correct, If Not Correct		TRAVIS L BOWEN 497 N CAPITOL AVE STE 20 IDAHO FALLS ID 83405												
	JRB INVESTMENTS, L.C. D GREGG BAKER 315 TRUEX CT		3. Organized Under the Laws of:												
* FIRST NOTICE * IDAHO FALLS ID 83401 ID W 1969															
4. Corporations: Enter Names and Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input checked="" type="checkbox"/> Managers or <input type="checkbox"/> Members (check one)															
<table style="width: 100%; border: none;"> <thead> <tr> <th style="text-align: left;"><u>Office held</u></th> <th style="text-align: left;"><u>Name</u></th> <th style="text-align: left;"><u>Street or P.O. Address</u></th> <th style="text-align: left;"><u>City</u></th> <th style="text-align: left;"><u>State</u></th> <th style="text-align: left;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td style="vertical-align: top;">Operating Manager</td> <td style="vertical-align: top;">D. Gregg Baker</td> <td style="vertical-align: top;">(as above)</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	Operating Manager	D. Gregg Baker	(as above)			
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>										
Operating Manager	D. Gregg Baker	(as above)													
5. SIGNATURE OF CURRENT RA ANY LAWFUL		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>D. Gregg Baker</u> Date <u>10/31/96</u> Name <small>(Typed or Printed)</small> <u>D. Gregg Baker</u> Title <u>Operating Manager</u>													

ISSUED: 07-08-1996

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