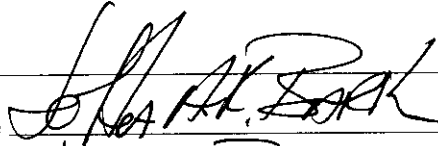


No. C 91061	Due no later than Dec 31, 2001	2. Registered Agent and Office NO PO BOX																																				
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	Annual Report Form 1. Mailing Address - Correct in this box, if applicable BARKER RIVER TRIPS, INC. JOHN A.K. BARKER 2124 GRELLE LEWISTON, ID 83501	JOHN A.K. BARKER 2124 GRELLE LEWISTON, ID 83501																																				
		3. <u>New</u> Registered Agent Signature																																				
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>DIRECTOR PRESIDENT</td> <td>JOHN A.K. BARKER</td> <td>2124 GRELLE</td> <td>LEW, ID</td> <td></td> <td>83501</td> </tr> <tr> <td>SECRET SECRET</td> <td>MARY E K. BARKER</td> <td>2124 GRELLE</td> <td>LEW, ID</td> <td></td> <td>83501</td> </tr> <tr> <td>DIRECTOR</td> <td>DUVOIT S. BARKER</td> <td>BOX 4445</td> <td>MCCALL</td> <td>ID</td> <td></td> </tr> <tr> <td>DIRECTOR</td> <td>JACQUES P. BARKER</td> <td>3936 21st ST</td> <td>LEWISTON,</td> <td>ID</td> <td>83501</td> </tr> <tr> <td>DIRECTOR</td> <td>JOHN A.K. BARKER</td> <td>ANDER SVOP. PASS,</td> <td>WA</td> <td></td> <td>98068</td> </tr> </tbody> </table>			Office held	Name	Street or P.O. Address	City	State	Zip	DIRECTOR PRESIDENT	JOHN A.K. BARKER	2124 GRELLE	LEW, ID		83501	SECRET SECRET	MARY E K. BARKER	2124 GRELLE	LEW, ID		83501	DIRECTOR	DUVOIT S. BARKER	BOX 4445	MCCALL	ID		DIRECTOR	JACQUES P. BARKER	3936 21st ST	LEWISTON,	ID	83501	DIRECTOR	JOHN A.K. BARKER	ANDER SVOP. PASS,	WA		98068
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5. Organized Under the Laws of: IDAHO C 91061	6.  Signature _____ Date 12-29-01 Name (Typed or Printed) JOHN A.K. BARKER Title DIRECTOR																																					