

<b>No. C119996</b>	<b>Annual Report Form</b> Due No Later Than November 30, 1999	<b>2. Registered Agent and Office NOT A P.O. BOX</b>  <b>LISA D WEST</b> <b>COUNTY RD 62</b> <b>HCR 85 BOX 187</b> <b>BONNERS FERRY ID 83805</b>
<b>Return to:</b> SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FEE REQUIRED</b>	<b>1. Mailing Address - Please Correct If Not Correct</b>  <b>TIMBERWEST, INC.</b>  <b>HCR 85 BOX 187</b>  <b>BONNERS FERRY ID 83805</b>	<b>3. Organized Under the Laws of:</b>  <b>ID C119996</b>
<b>** FINAL NOTICE **</b>		
<b>4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors</b> <b>Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one)</b>		
<b>Office held</b>	<b>Name</b>	<b>Street or P.O. Address</b>
<b>President</b>	<b>Timothy M West</b>	<b>HCR 85, Box 187</b>
<b>Sec/Treas.</b>	<b>Lisa D. West</b>	<b>HCR 85, Box 187</b>
		<b>City</b>
		<b>Bonn timer Ferry</b>
		<b>State</b>
		<b>Id.</b>
		<b>Zip</b>
		<b>83805</b>
		<b>83805</b>
<b>5. New Registered Agent Signature</b>		<b>6.</b>  <b>Signature</b> <u>Lisa D West</u> <b>Date</b> <u>10/19/99</u> <b>Name (Typed or Printed)</b> <u>Lisa D. West</u> <b>Title</b> <u>Sec/Treas.</u>

ISSUED: 10-01-1999

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