	5		Report Form Than November 30,	1996	2. Registered Agent		A P.O. BOX
Return to: SECRETARY OF STA 700 WEST JEFFERS	AIE		Correct, If Not Correct		TRISHA :		ST
PO BOX 83720 BOISE, ID 83720-008	BO T F	RISHA SUGA:	REK		зотѕе	ID	83702
NO FEE REQUIRE	:D				3. Organized Under the Laws of:		
* FIRST NOT	ICE * BO	DISE	ID 8370	2	ID	0115	065
		esses of President , s nes and Addresses of	Secretary and Director f Managers or	rs ! Members (d	theck one)		
Office held Exec.Direc	<u>Name</u>	Street	t or P.O. Address		City	State	<u>Zip</u>
				BOISE,	ID 83702		
				BOISE,	ID 83702		
5. NATURE OF	3USINESS		nat this Annual Report e true, correct and con	lyas been ex	•	nd is to the be $8 - 1 - 9$	est of my
NATURE OF PROFESSI	ONAL LIVE T	knowledg Signature	e true, correct and con	pas been ex	amined by me a	8-1-9	ب ب
NATURE OF PROFESSI		knowledg Signature	e true, correct and con	pas been ex	amined by me all Date	8-1-9	ا با
NATURE OF PROFESSI	ONAL LIVE T	knowledg Signature	e true, correct and con	pas been ex	amined by me all Date	8-1-9 Skoc. D	ا با