

Annual Report Form Due No Later Than November 30,		1998	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 * FIRST NOTICE *		1. Mailing Address - Please Correct, If Not Correct MORGAN ASSOCIATES, INC RICHARD FULLILOVE 4380 BEACON LIGHT ROAD EAGLE ID 83616		ERIC L. HAFF 1109 W MAIN STREET, SUITE BOISE ID 83702																		
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one)		3. Organized Under the Laws of: ID C 96405																				
<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>President</td><td>Richard Fullilove</td><td>4380 W. Beacon Light Road</td><td>Eagle</td><td>ID</td><td>83616</td></tr><tr><td>Secretary</td><td>Cheryl Fullilove</td><td>4380 W. Beacon Light Road</td><td>Eagle</td><td>ID</td><td>83616</td></tr></tbody></table> <p>Both are Directors</p>					Office held	Name	Street or P.O. Address	City	State	Zip	President	Richard Fullilove	4380 W. Beacon Light Road	Eagle	ID	83616	Secretary	Cheryl Fullilove	4380 W. Beacon Light Road	Eagle	ID	83616
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Secretary	Cheryl Fullilove	4380 W. Beacon Light Road	Eagle	ID	83616																	
5. Signature of New Registered Agent		6. Signature <u>Richard Fullilove</u> Date <u>7-17-98</u> Name <small>(Typed or Printed)</small> <u>Richard Fullilove</u> Title <u>President</u>																				

ISSUED: 07-03-1998

DO NOT TAPE OR STAPLE

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