No. C 31/	44		Report Form or Than November 30,	1998	2. Registered Agent .	and Office NC	T A P.O. BOX
Return to: SECRETARY OF S 700 WEST JEFFER PO BOX 83720 BOISE, ID 83720-0	RSON	1 Madin Address Pleas	e Correct II Not Correct TY & INSURAN ARRISH		4537 YELI	LOWSTOR	IE
NO FEE REQUI					3. Organized Under the Laws of:		
* FIRST NO	TICE *	POCATELLO	ID 8320	2	ID	C :	31444
		Business Addresses of Pre er Names and Addresses o		irectors   Members (	(check one)		
Office held PRESIDENT V-PRESIDENT	<u>Name</u> Rooney J Cealg W	PARRISH 453"	nt or P.O. Address † Yellowstone / Box 4321	lve.	City POCATELLO POCATELLO	State ID ID	Zio 83202 83205
SECKETARY	-	_	4 MEKINLEY A	V E.	POCATELLO	10	83201
DIRECTOR			E CHUSSUCK		POCATELLO	۵۱	83202
<sup>5.</sup> Signature of Ne	w Registered	Agent 6.	, Pr		Date	7/13/9	8
		Name (Tyr	od or R. MICHARL F	ARRISH	Title	ECLB TAI	4
133UED:	<del>07-03-1</del>	DO NOT	TAPE OR ST	APLE )		945	
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