Return to: SECRETARY OF STATE FOO WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED ** FIRST NOTICE ** BOISE Limited Liability Companies: Enter Names and Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of Imanagers or Imanagers or Imanagers ** Street or P.O. Address ** TABS. STAMES G. GRIMES ** Street or P.O. Address ** S	SECRETARY OF STATE SECRETARY OF	lo. C111165	Annual Report Form Due No Later Than November 30. 1996	2. Registered Agent a	nd Office NOT A P.O. BOX
PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED \$463 WILLOWD ALE DR \$301SE ID 33714 3. Organized Under the Laws of: ** FIRST NOTICE ** ROUSE Corporations: Enter Names and Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of Managers or Members (check one) Office held Name Street or P.O. Address City State Zio FORS TRES JAMES G. GRIMES SYLE WILLOWDHLE DR BUSE ID 83714 NATURE OF BUSINESS ANY LAWFJ Name Name Name Name Corporations: Enter Names and Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of Managers or Members (check one) Office held Name Street or P.O. Address City State Zio BUSE ID 83714 FOR STATES Name Name	PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED 3 468 WILLOWD ALE DR 3 OTSE 10 33714 3 Organized Under the Laws of: 1 FIRST NOTICE * ROLSE Corporations: Enter Names and Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of Managers or Members (check one) Office held Name Street or P.O. Address City State Tip STATES G. GAIMES 8448 WILLOWDALE DR BUSSE LINDA GRIMES 8448 WILLOWDALE DR BUSSE TD 83714 STATE NATURE OF BISINESS Signature Name Name City State Store State Signature Name Name Name City State Name Street or P.O. Address City State State Name Street or P.O. Address City State Name Name Name Street or P.O. Address City State Name Street or P.O. Address City State Name Nam				. –
* FIRST NOTICE * BOISE TO 83714 ID C111166 Corporations: Enter Names and Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of Managers or Members (check one) Office held Name Street or P.O. Address City State Zip PRES TRES. JAMES G. CHIMES 8468 WILLEWARLE DR BUSE ID 837144 IP SEC LINDA GRIMES 8468 WILLEWARLE DR BUSE ID 837144 NATURE OF BUSINESS Office held Name Street or P.O. Address City State Zip RES TRES. JAMES G. CHIMES 8468 WILLEWARLE DR BUSE ID 837144 OFFICE DR BUSINESS Signature Security that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. Signature Security Title IRES. Name Typed or Title IRES.	FIRST NOTICE * BOISE TO 83714 TO C111166 Corporations: Enter Names and Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of Managers or Members (check one) Offlice held Name Street or P.O. Address FIRST NOTICE * BOISE The State Tip Offlice held Name Street or P.O. Address FIRST NOTICE * BOISE The State Tip Offlice held Name Street or P.O. Address Offlice held Name Street or P.O. Address or P.O. Addr	PO BOX 83720		30ISE	10 33714
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6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. Signature Lawry Date 7-15% Name (Typed or Printed) Name (Typed or Printed)	NATURE OF BUSINESS. 6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. Signature Leme Date 7-1596 Name (Typed or Times C. GRIMES Title MCS.				
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