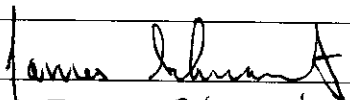
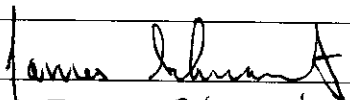
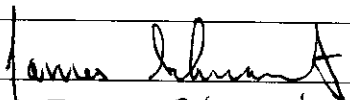


No. C 95459 Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	Due no later than Jun 30, 2001 Annual Report Form 1. Mailing Address - Correct in this box, if applicable NORTH WOODS NURSERY, INC. JAMES D. SCHWARTZ BOX 149 ELK RIVER, ID 83827	2. Registered Agent and Office NO PO BOX JAMES D. SCHWARTZ 3048 HIGHWAY 8 ELK RIVER, ID 83827 3. <u>New</u> Registered Agent Signature
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4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President	James Schwartz	P.O. Box 149	Elk River,	ID	83827
Secretary	Marla Schwartz	P.O. Box 149	Elk River,	ID	83827
Directors	James Schwartz				
	Marla Schwartz	PO Box 149	Elk River,	ID	83827

5. Organized Under the Laws of: IDAHO C 95459	6. <table style="width: 100%; margin-top: 10px;"> <tr> <td style="width: 60%;"> Signature  </td> <td style="width: 40%;"> Date <u>4/15/01</u> </td> </tr> <tr> <td> Name <small>(Typed or Printed)</small> <u>James Schwartz</u> </td> <td> Title: <u>President</u> </td> </tr> </table>	Signature 	Date <u>4/15/01</u>	Name <small>(Typed or Printed)</small> <u>James Schwartz</u>	Title: <u>President</u>
Signature 	Date <u>4/15/01</u>				
Name <small>(Typed or Printed)</small> <u>James Schwartz</u>	Title: <u>President</u>				