

No. W 963

Annual Report Form
Due No Later Than November 30, 1996

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

SHADY NOOK RESTAURANT, L.L.C
MICHAEL D MCLAIN
PO BOX 486

2. Registered Agent and Office NOT A P.O. BOX

MICHAEL D MCLAIN
HIGHWAY 93 N
SALMON ID 83467

3. Organized Under the Laws of:

ID W 963

4. Corporations: Enter Names and Addresses of President, Secretary and Directors
Limited Liability Companies: Enter Names and Addresses of Managers or Members (check one)

Office heldNameStreet or P.O. AddressCityStateZip

MANAGING Agent MICHAEL D MCLAIN

P.O. Box 9

Salmon

IDAHO 83467

5. SIGNATURE OF CURRENT RA

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

Name (Typed or Printed) MICHAEL D MCLAIN

Date

July 22, 1996

Title Reg. Managing Agent

ISSUED: 07-08-1996

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