


No. C 90652 Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED	Annual Report Form Due No Later Than November 30, 1996 1. Mailing Address - Please Correct, If Not Correct GARFIELD BAY RESORT, INC. VERL E THAYER 6890 WEST GARFIELD BAY RD SAGLE ID 83860	2. Registered Agent and Office NOT A P.O. BOX VERL E THAYER 6890 WEST GARFIELD BAY SAGLE ID 83860 3. Organized Under the Laws of: ID C 96652																		
* FIRST NOTICE * 4. Corporations: Enter Names and 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) <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>PRES</td> <td>VERL E. THAYER</td> <td>6890 W. GARFIELD BAY RD</td> <td>SAGLE</td> <td>ID</td> <td>83860</td> </tr> <tr> <td>SEC</td> <td>RITA S. WALKER</td> <td>" " " "</td> <td>" "</td> <td>" "</td> <td>" "</td> </tr> </tbody> </table>			Office held	Name	Street or P.O. Address	City	State	Zip	PRES	VERL E. THAYER	6890 W. GARFIELD BAY RD	SAGLE	ID	83860	SEC	RITA S. WALKER	" " " "	" "	" "	" "
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SEC	RITA S. WALKER	" " " "	" "	" "	" "															
5. NATURE OF BUSINESS COMMERCIAL RESORT	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  Date <u>7/22/96</u> Name (Typed or Printed) <u>VERL E. THAYER</u> Title <u>PRES</u>																			

ISSUED: 07-06-1996

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