o. C 50958	Annual Report Form 1998	2. Registered Agent an		
Return to: SECRETARY OF STATE	1. Mailing Address - Please Correct, If Not Correct KAPEN L. PORTER 150 2ND STREET WEST			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED	4 WAYS TRAVEL SERVICE, INC. KAREN L. PORTER 160 SECOND ST. WEST	TWIN FALL	s ID	
* FIRST NOTICE *	TWIN FALLS ID 83301	10	Ć 5	0958
•	Business Addresses of President, Secretary and Directors or Names and Addresses of U Managers or U Members	(check one)		
Office held Name	Street or P.O. Address	City	State	Zip
President Diana	M. Rolig 160 2nd St. W.	Twin Falls	ID	83301
Secretary LoriL	ee Jones 703 E. 1st St.	Meridian	ID	83642
Signature of New Registered Draua M. Rolig	Signature District All Kro	2316	7-16-9 residen	
ISSUED: 07-03-1		` 3	531	
	C DO NOT TAPE OR STAPLE	l .		