

No. 814	Idaho Limited Liability Company Annual Report Form	2. Registered Agent and Office NOT A P.O. BOX
Return To Secretary of State Room 203, Statehouse P.O. BOX 83720 Boise, ID 83720-0080 ** FINAL NOTICE ** NO FEE REQUIRED	<i>Due No Later Than November 1, 1995</i>	R. CRAIG GROVES 7733 W. EMERALD
	1. Mailing Address — <i>(Type in Correct, If Not Correct)</i> PARK POINTE CENTER, A LIMITED L R. CRAIG GROVES 7733 W. EMERALD BOISE ID 83704	BOISE ID 83704 3. Organized Under The Laws of ID NO: 814

4. Names and Addresses of Managers or Members (check one) **MUST BE PRINTED OR TYPED**

Name	Street or P.O. Address	City	State	Zip
R CRAIG GROVES	6223 N DISCOVERY WY, ST#100	BOISE	ID	83713

5. Signature of the Current Registered Agent (if changed in block 2)	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 <u>RCG</u> Date <u>10/31/95</u> <small>Name (Type or Printed)</small>
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