

No. <b>W 769</b>	<b>Annual Report Form 1997</b> <i>Due No Later Than November 30,</i>		2. Registered Agent and Office <b>NOT A P.O. BOX</b> <b>CHRISTOPHER J MOORE</b> <b>1219 IDAHO ST</b>  <b>LEWISTON ID 83501</b>
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FEE REQUIRED</b>  <b>* FIRST NOTICE *</b>	1. Mailing Address Please Correct, If Not Correct <b>CREASON, MOORE, DOKKEN &amp; MCI</b> <b>CHRISTOPHER J MOORE</b> <b>PO DRAWER 835</b>  <b>LEWISTON ID 83501</b>		3. Organized Under the Laws of  <b>ID W 769</b>
4. Corporations: Enter Names and Business Addresses of <b>President, Secretary and Directors</b> Limited Liability Companies: Enter Names and Addresses of <input checked="" type="checkbox"/> <b>Managers</b> or <input type="checkbox"/> <b>Members</b> (check one)			
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>
<u>State</u>	<u>Zip</u>		
Managing Member	Christopher J. Moore	1219 Idaho Street	Lewiston ID 83501
5. <b>SIGNATURE OF CURRENT RA</b>		6. Signature <u><i>Christopher J. Moore</i></u> Date <u>7/14/97</u> Name (Typed or Printed) <u>Christopher J. Moore</u> Title <u>Managing Member</u>	

ISSUED: 07-04-1997

DO NOT TAPE OR STAPLE

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