

No. C105381	Annual Report Form <i>Due No Later Than November 30, 1996</i>		2. Registered Agent and Office NOT A P.O. BOX MICHAEL K SOWARDS 2433 N GOVERNMENT WAY ST COEUR D'ALENE ID 83814	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED	1. Mailing Address - Please Correct, If Not Correct NPT, INC. MICHAEL K SOWARDS 2433 N GOVERNMENT WAY STE A		3. Organized Under the Laws of: ID	
* 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)				
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>
President	Michael K. Sowards	3406 Buckskin Rd	Coeur dAlene	ID 83814
Secretary	Karmen C. Sowards	3406 Buckskin Rd	Coeur dAlene	ID 83814
Director	Norman K. Sowards	1719 Finch Rd	Hayden Lake	Id 83835
5. NATURE OF BUSINESS ENGINEERING		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><i>Karmen Sowards</i></u> Date <u>10/15/96</u> Name (Typed or Printed) <u>Karmen Sowards</u> Title <u>Secretary</u>		

ISSUED: 07-06-1996

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