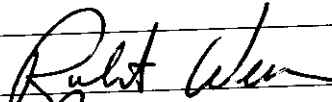


No. C 96446	Due no later than Oct 31, 2001 Annual Report Form	2. Registered Agent and Office NO PO BOX ROBERT A WEAVER 514 OAK ST 516 1/2 OAK ST SANDPOINT, ID 83864
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable COLLATERAL LOAN CORPORATION ROBERT A WEAVER 514 OAK ST 516 1/2 OAK ST. SANDPOINT, ID 83864	3. <u>New</u> Registered Agent Signature
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.		
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>
<u>City</u>	<u>State</u>	<u>Zip</u>
PRESIDENT/ DIRECTOR	ROBERT WEAVER	P.O. Box 5
SANDPOINT	ID	83864
SECRETARY/ DIRECTOR	CELAH WEAVER	P.O. Box 5
SANDPOINT	ID	83864
5. Organized Under the Laws of: <div style="text-align: center;">IDAHO C 96446</div>		6. Signature  Name (Typed or Printed) ROBERT WEAVER
Date 8/29/01 Title PRESIDENT		3602