<u> </u>	INSTRU	CTIONS ON REVERSE SIDE			
		ation Annual Report Form	2. Registered Agent and Office NOT A P.O. BOX		
Return To	Due No Later Then November 1, 1993 1 Mailing Address = Plante Control (1/10/2) Control SPRING CREEK, INC. THOMAS P ZIEGLER PO BOX 41 KETCHUM ID 83340		THOMAS P ZIEGLER UNIT 6-12 10TH ST CENTER KETCHUM ID 83340 3. Incorporated Under The Laws of ID NO: 101146		
Secretary of State Room 203, Statehouse Boise, ID 83720 * FIRST NOTICE * NO FEE REQUIRED					
4. Names and Addresses of Officer	rs and Directors	MUST BE PRINTED	OR TYPED	· d	
President: Kennith	R. ZIECHN	Street or P.O. Address	<u>city</u> Manhathan Bch	State CA-	<u>zio</u> 80266
Secretary: Thomas P Directors:	ZIEGHER	Box 41	Manhathan Bch Ketchum	ID	83340
5. Nature of Business	6. I certify t	hat this Annual Report has been exa	mined by me and is to the bo	est of my	knowledge