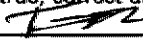


No. C115323	Annual Report Form 1996 <i>Due No Later Than November 30,</i>		2. Registered Agent and Office NOT A P.O. BOX TIMOTHY HOMER 506 1/2 MAIN ST #2 SALMON ID 83457																			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED	1. Mailing Address - Please Correct, If Not Correct		3. Organized Under the Laws of: ID C115323																			
	LEMHI TRANSPORTATION, INC. TIMOTHY HOMER PO BOX 565 SALMON ID 83467																					
* 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> <u>Zip</u>																						
<table style="width: 100%; border: none;"> <tr> <td style="width: 15%;">President/</td> <td style="width: 20%;">Tim Homer</td> <td style="width: 30%;">PO Box 565</td> <td style="width: 15%;">Salmon</td> <td style="width: 10%;">ID</td> <td style="width: 10%;">83467</td> </tr> <tr> <td>Director</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Secretary</td> <td>Steve Homer</td> <td>12755 Mill Ride #504</td> <td>Cypress</td> <td>TX</td> <td>77429</td> </tr> </table>					President/	Tim Homer	PO Box 565	Salmon	ID	83467	Director						Secretary	Steve Homer	12755 Mill Ride #504	Cypress	TX	77429
President/	Tim Homer	PO Box 565	Salmon	ID	83467																	
Director																						
Secretary	Steve Homer	12755 Mill Ride #504	Cypress	TX	77429																	
5. NATURE OF BUSINESS AIR TRANSPORT		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></u> Date <u>8-9-96</u> Name (Typed or Printed) <u>Tim Homer</u> Title <u>President</u>																				

ISSUED: 07-06-1996

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