

No. W 700	Annual Report Form Due No Later Than November 30, 1996		2. Registered Agent and Office NOT A P.O. BOX													
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 TWIN BRIDGES GROUP, L.L.C. ROBERT P DREYER PO BOX 4917		ROBERT P DREYER 219 CANYON RUN BLVD KETCHUM ID 83340													
* FIRST NOTICE * KETCHUM ID 83340 ID W 700																
4. Corporations: Enter Names and Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input checked="" type="checkbox"/> Managers or <input type="checkbox"/> Members (check one) <table border="0"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>MANAGER</td> <td>ROBERT P. DREYER</td> <td>P.O. #4917</td> <td>KETCHUM,</td> <td>ID</td> <td>83340</td> </tr> </tbody> </table>					<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	MANAGER	ROBERT P. DREYER	P.O. #4917	KETCHUM,	ID	83340
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>											
MANAGER	ROBERT P. DREYER	P.O. #4917	KETCHUM,	ID	83340											
5. SIGNATURE OF CURRENT RA	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>[Signature]</i></u> Date <u>9/3/96</u> Name (Typed or Printed) <u>B. P. DREYER</u> Title <u>MANAGER</u>															

ISSUED: 07-08-1996

542