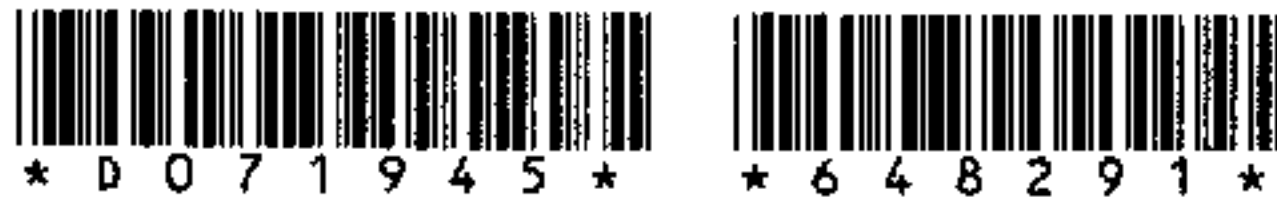


MONTANA CORPORATION ANNUAL REPORT 2001  
MUST BE RETURNED AS REQUIRED BY 35-2-904, MCA

648291



Sign an



(If you c  
Make cl.

STATE OF MONTANA

**FILED**

FEB 26 2001

SECRETARY OF STATE

MISSOURI RIVER RANCHES LANDOWNERS CORPORATION

%JAMES C LANE  
210 MILWAUKEE AVE  
DEER LODGE MT 59722-1067

FOLDER: D- 071945  
TYPE: 54 DGT

Box A: To CHANGE Registered Agent Information, complete box and pay additional \$5 fee.

Registered Agent address according to our records:  
(To change, complete Box A to right.)

210 MILWAUKEE AVE  
DEER LODGE MT 59722

NEW REGISTERED AGENT NAME		
NEW PHYSICAL ADDRESS		
MAILING ADDRESS		
CITY	STATE MT	ZIP
NEW REGISTERED AGENT SIGNATURE		

**PAID**

\$ 10

Make changes per instructions, sign and return with required fee (see back).

1. State/Country of Incorporation: MONTANA
2. Description of Business: MUTUAL BENEFIT WITH MEMBERS
3. Principal Officers - At least one officer MUST be listed. If necessary, make changes to the right. Attach list if there are more than four officers.

President:

JAMES C LANE  
210 MILWAUKEE AVE  
DEER LODGE MT 59722

Vice President:

JOHN BUCHANAN  
BOX 1643  
GREAT FALLS MT 59403

Secretary:

DEANNA L LANE  
210 MILWAUKEE AVE  
DEER LODGE MT 59722

Treasurer:

VACANT

**RECEIVED**

FEB 26 2001

**RECEIVED**

JAN 29 2001

MONTANA SECRETARY OF STATE  
SIGNATURE REQUIRED ON BACK (over)

MONTANA SECRETARY OF STATE

4. Directors of Corporation - At least 3 director(s) MUST be listed below. If necessary, make changes to the right. Attach list if more than five directors.

JAMES C LANE  
210 MILWAUKEE AVE  
DEER LODGE MT 59722--

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

DEANNA L LANE  
210 MILWAUKEE AVE  
DEER LODGE MT 59722--

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

JOHN D BUCHANAN  
P O BOX 1643  
GREAT FALLS MT 59403--

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

BY MY SIGNATURE BELOW, I, AN OFFICIAL OF THE ABOVE CORPORATION, DO STATE THAT I SIGNED THIS REPORT ON BEHALF OF THE CORPORATION AND THAT THE STATEMENTS HEREIN CONTAINED ARE TRUE, UNDER PENALTY OF FALSE SWEARING.

X   
SIGNATURE OF OFFICER  
OR CHAIRMAN OF BOARD

President  
TITLE

James C. Lane  
PRINTED NAME OF  
SIGNING OFFICIAL

2-23-01  
DATE

Sign and include correct filing fee:  
\$10 if filed on or before April 15th  
\$20 if filed after April 15th  
\$30 if filed after September 1st  
(If you complete Box A, an additional \$5 is required)  
Make checks payable to Secretary of State.

Please send fee and completed report to:  
Bob Brown (406) 444-3665  
Secretary of State  
PO Box 202802  
Helena MT 59620-2802