

<b>Form 5500-SF</b>  Department of the Treasury Internal Revenue Service  Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	<b>Short Form Annual Return/Report of Small Employee Benefit Plan</b>  This form is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA), and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code).  <b>▶ Complete all entries in accordance with the instructions to the Form 5500-SF.</b>	OMB Nos. 1210-0110 1210-0089  <div style="border: 1px solid black; padding: 5px; text-align: center; font-weight: bold; font-size: 1.2em;">2012</div> <b>This Form is Open to Public Inspection</b>
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<b>Part I Annual Report Identification Information</b>			
For calendar plan year 2012 or fiscal plan year beginning <u>01/01/2012</u> and ending <u>12/31/2012</u>			
<b>A</b>	This return/report is for:	<input checked="" type="checkbox"/> a single-employer plan <input type="checkbox"/> a multiple-employer plan (not multiemployer) <input type="checkbox"/> a one-participant plan	
<b>B</b>	This return/report is:	<input type="checkbox"/> the first return/report <input checked="" type="checkbox"/> the final return/report <input type="checkbox"/> an amended return/report <input type="checkbox"/> a short plan year return/report (less than 12 months)	
<b>C</b>	Check box if filing under:	<input type="checkbox"/> Form 5558 <input type="checkbox"/> automatic extension <input type="checkbox"/> DFVC program <input checked="" type="checkbox"/> special extension (enter description) <u>SEE ATTACHED LETTERS</u>	

<b>Part II Basic Plan Information</b> —enter all requested information			
<b>1a</b>	Name of plan <u>FARWEST FREIGHT SYSTEMS INC 401K PROFITS SHARING PLAN AND TRUST</u>	<b>1b</b>	Three-digit plan number (PN) ▶ <u>001</u>
		<b>1c</b>	Effective date of plan <u>11/01/2002</u>
<b>2a</b>	Plan sponsor's name and address; include room or suite number (employer, if for a single-employer plan) <u>FARWEST FREIGHT SYSTEMS INC</u> <u>OUT OF BUSINESS - PLAN WIND DOWN SINCE 2009</u> <u>ROBERT AND BRANDIS GEDDES</u> <u>P.O. BOX 439</u> <u>KAPOWSIN, WA 98344</u>	<b>2b</b>	Employer Identification Number (EIN) <u>91-0978531</u>
		<b>2c</b>	Sponsor's telephone number <u>253-569-1466</u>
		<b>2d</b>	Business code (see instructions) <u>484120</u>
<b>3a</b>	Plan administrator's name and address <input checked="" type="checkbox"/> Same as Plan Sponsor Name <input type="checkbox"/> Same as Plan Sponsor Address	<b>3b</b>	Administrator's EIN
		<b>3c</b>	Administrator's telephone number
<b>4</b>	If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN, and the plan number from the last return/report. <b>a</b> Sponsor's name	<b>4b</b>	EIN
		<b>4c</b>	PN
<b>5a</b>	Total number of participants at the beginning of the plan year .....	<b>5a</b>	<u>75</u>
<b>b</b>	Total number of participants at the end of the plan year .....	<b>5b</b>	<u>0</u>
<b>c</b>	Number of participants with account balances as of the end of the plan year (defined benefit plans do not complete this item) .....	<b>5c</b>	<u>0</u>
<b>6a</b>	Were all of the plan's assets during the plan year invested in eligible assets? (See instructions.) .....	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
<b>b</b>	Are you claiming a waiver of the annual examination and report of an independent qualified public accountant (IQPA) under 29 CFR 2520.104-46? (See instructions on waiver eligibility and conditions.) .....	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No

If you answered "No" to either line 6a or line 6b, the plan cannot use Form 5500-SF and must instead use Form 5500.

**Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.**

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including, if applicable, a Schedule SB or Schedule MB completed and signed by an enrolled actuary, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE	Filed with authorized/valid electronic signature.	07/31/2014	BRANDIS GEDDES
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
Preparer's name (including firm name, if applicable) and address; include room or suite number (optional) <u>BRANDIS GEDDES</u>  <u>P.O. BOX 210</u> <u>HERON, MT 59844</u>			Preparer's telephone number (optional)  <u>253-569-1466</u>

**Part III Financial Information**

<b>7 Plan Assets and Liabilities</b>		<b>(a) Beginning of Year</b>	<b>(b) End of Year</b>
<b>a</b> Total plan assets .....	<b>7a</b>	51021	0
<b>b</b> Total plan liabilities .....	<b>7b</b>		
<b>c</b> Net plan assets (subtract line 7b from line 7a) .....	<b>7c</b>	51021	0
<b>8 Income, Expenses, and Transfers for this Plan Year</b>		<b>(a) Amount</b>	<b>(b) Total</b>
<b>a</b> Contributions received or receivable from:			
<b>(1)</b> Employers .....	<b>8a(1)</b>	0	
<b>(2)</b> Participants .....	<b>8a(2)</b>	0	
<b>(3)</b> Others (including rollovers) .....	<b>8a(3)</b>	0	
<b>b</b> Other income (loss) .....	<b>8b</b>	0	
<b>c</b> Total income (add lines 8a(1), 8a(2), 8a(3), and 8b) .....	<b>8c</b>		0
<b>d</b> Benefits paid (including direct rollovers and insurance premiums to provide benefits) .....	<b>8d</b>	0	
<b>e</b> Certain deemed and/or corrective distributions (see instructions) ....	<b>8e</b>	0	
<b>f</b> Administrative service providers (salaries, fees, commissions) .....	<b>8f</b>	0	
<b>g</b> Other expenses .....	<b>8g</b>	0	
<b>h</b> Total expenses (add lines 8d, 8e, 8f, and 8g) .....	<b>8h</b>		0
<b>i</b> Net income (loss) (subtract line 8h from line 8c) .....	<b>8i</b>		0
<b>j</b> Transfers to (from) the plan (see instructions) .....	<b>8j</b>	0	

**Part IV Plan Characteristics**

- 9a** If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristic Codes in the instructions:  
1H
- b** If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristic Codes in the instructions:

**Part V Compliance Questions**

<b>10 During the plan year:</b>		<b>Yes</b>	<b>No</b>	<b>Amount</b>
<b>a</b> Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? (See instructions and DOL's Voluntary Fiduciary Correction Program) .....	<b>10a</b>		X	
<b>b</b> Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 10a.) .....	<b>10b</b>		X	
<b>c</b> Was the plan covered by a fidelity bond? .....	<b>10c</b>		X	
<b>d</b> Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty? .....	<b>10d</b>		X	
<b>e</b> Were any fees or commissions paid to any brokers, agents, or other persons by an insurance carrier, insurance service or other organization that provides some or all of the benefits under the plan? (See instructions.) .....	<b>10e</b>		X	
<b>f</b> Has the plan failed to provide any benefit when due under the plan? .....	<b>10f</b>		X	
<b>g</b> Did the plan have any participant loans? (If "Yes," enter amount as of year end.) .....	<b>10g</b>		X	
<b>h</b> If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.) .....	<b>10h</b>		X	
<b>i</b> If 10h was answered "Yes," check the box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3 .....	<b>10i</b>		X	

**Part VI Pension Funding Compliance**

<b>11</b> Is this a defined benefit plan subject to minimum funding requirements? (If "Yes," see instructions and complete Schedule SB (Form 5500) and line 11a below) .....	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>11a</b> Enter the amount from Schedule SB line 39 .....	<b>11a</b>
<b>12</b> Is this a defined contribution plan subject to the minimum funding requirements of section 412 of the Code or section 302 of ERISA? ..	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
(If "Yes," complete line 12a or lines 12b, 12c, 12d, and 12e below, as applicable.)	
<b>a</b> If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions, and enter the date of the letter ruling granting the waiver. .... Month _____ Day _____ Year _____	
<b>If you completed line 12a, complete lines 3, 9, and 10 of Schedule MB (Form 5500), and skip to line 13.</b>	
<b>b</b> Enter the minimum required contribution for this plan year .....	<b>12b</b>

<b>c</b> Enter the amount contributed by the employer to the plan for this plan year.....	<b>12c</b>	
<b>d</b> Subtract the amount in line 12c from the amount in line 12b. Enter the result (enter a minus sign to the left of a negative amount) .....	<b>12d</b>	
<b>e</b> Will the minimum funding amount reported on line 12d be met by the funding deadline?.....	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	

**Part VII Plan Terminations and Transfers of Assets**

<b>13a</b> Has a resolution to terminate the plan been adopted in any plan year? .....	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
If "Yes," enter the amount of any plan assets that reverted to the employer this year .....	<b>13a</b> 0
<b>b</b> Were all the plan assets distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC? .....	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>c</b> If during this plan year, any assets or liabilities were transferred from this plan to another plan(s), identify the plan(s) to which assets or liabilities were transferred. (See instructions.)	
<b>13c(1)</b> Name of plan(s):	<b>13c(2)</b> EIN(s)
	<b>13c(3)</b> PN(s)

**Part VIII Trust Information (optional)**

<b>14a</b> Name of trust	<b>14b</b> Trust's EIN

8-7-2012

This is an attachment for the 2010 and 2011 5500 Efast filings for Farwest Freight Systems Inc.,.

This Company ceased operations on 9/1/2009. From that point forward there has been an ongoing notification and arduous process of trying to end/terminate this 401k plan.

Farwest Freight Systems Inc., was a family owned business that my Husband, Robert A. Geddes, purchased from his father, Robert L. Geddes. All in all the Company operated for @ 57 years.

During the last 3 years of operations, the economy and the industry were extremely difficult and resulted in a financially strained situation for Farwest Freight Systems.

I, Brandis Geddes, went to work for Farwest Freight Systems in October of 2006. Having no accounting background, but, common sense, and customer service skills - I worked on payment plans, accounts payable, and served on the Board as Secretary.

In late 2008, our CFO approached me and asked me to sign a document to become the "Administrator of the 401K". She advised me that since we had a payroll company, Paychex, they would do all reporting. It was just a slot that needed to be filled "name only" type of position. She left the Company towards the end of 2008 / early 2009 and I am certain was much relieved to be removed of that responsibility. My Husband and I relied very heavily on our CFO and Various Advisors to fill in any "detail" gaps that were not our areas of expertise.

In 2009 it became apparent that the Company's financial straits would not be improving and my Husband had multiple offers to sell the Company. Our Business Advisor at the time, Rory O Flaughtery, steered us very heavily in one direction.

In hindsight, this was a calculated and strategic move on his part and the part of Robert Denny to ruin the good name and reputation of Farwest Freight Systems Inc., They are unscrupulous individuals, Rory is a convicted felon, who misrepresented themselves, their intentions, and hurt many people that we cared a lot about. They have been party to civil lawsuits and are currently under investigation by the Dept of Homeland Security. Needless to say - not the end result or retirement that we were thinking of eventually having.

Farwest Freight Systems Inc., ceased 401k services and operations on 8/31/09.

Notices were mailed out or handed out to all employees, past and present who had funds in the plan that action would need to be taken re: their funds.

In my mind - the Retirement Plan - 401K / Paychex / Farwest Freight Systems Inc was done, finished, over - people were notified and it was their responsibility to do what they needed to do with their funds. I had never had control of their Retirement Funds, I never invested them, never touched them - so my job was done when we quit our services with Paychex.

My mind was apparently wrong. Some months later I rec'd a call from a DOL representative, Tonya Hanson, who advised my Husband and I that there were "fiduciary duties" and that we were responsible for making sure that the plan became terminated completely and devoid of participants. WOW! This was news. Tonya was extremely helpful over the next 10 months as we worked at contacting and getting less than pleased ex employees of Farwest Freight Systems to cooperate with the notification requirements.

This June we finished up with the notifications and sent escheat notices and also letters to the IRS to help track down missing participants.



The Department of Labor finished their inquiry (which I have included for your review) and basically did not impose any penalties as they noted that we made efforts to make things right and encouraged us to review "fiduciary requirements" if we ever find ourselves in this position again. (FYI -As God is My Witness, I will never - NEVER sign anything to do with a 401K plan again.)

In August of 2009 My Husband and I filed personal Bankruptcy. I did not find Employment until October of 2010 and am currently making minimum wage as a base salary with a commission schedule selling insurance. Not exactly lucrative. My Husband is on disability. We have lost our home to foreclosure. We cashed out my Husband's 401K to live on, and as a result owe taxes on that we will be on a payment plan on until who knows when.

The point of the brief snapshot of our financial picture is to show that we:

1. Do not have the funds at our disposal to pay \$750 for each for Paychex to prepare them for us.
2. Do not have funds for a CPA to help prepare the forms for us
3. Have no way to pay penalties of any kind for late filing on these reports

Please consider that the Company is not/has not been operating since August 2009.

We have been working with the Department of Labor to resolve this plan and comply to the best of our ability - recognizing that we are not experts trained in this field or equipped with prior knowledge of fiduciary duties or responsibilities.

I am hoping to make arrangements with the EFAST people to go through the form with them and fill out the form with the information provided by

Paychex - ASAP.

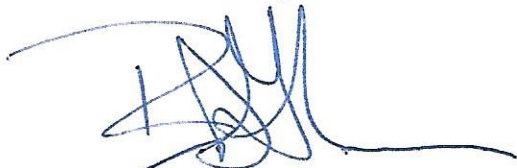
Upon receiving notice from the IRS to respond by 8/23/12, I have been constantly in contact and trying to get this resolved and the forms submitted.

In addition to filing the 2010 5500 late, upon calling the Efast phone number for information, the message advised that the 2011 5500 form needed to be filed by 7-31-12 or there would be penalties. I had no idea.

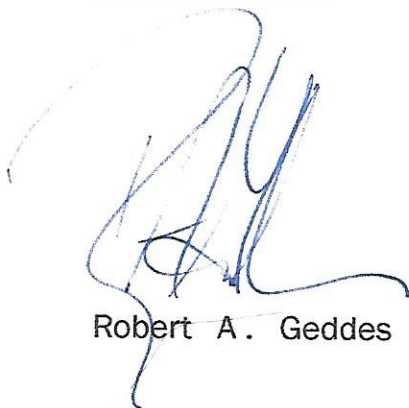
All I really want to do is file a final report.

My Husband and I thank you very much for your consideration of the aforementioned extenuating circumstances and our prayer for relief.

We sincerely look forward to your response,

A handwritten signature in blue ink, appearing to be 'Brandis Geddes', with a long horizontal line extending to the right.

Brandis Geddes

A handwritten signature in blue ink, appearing to be 'Robert A. Geddes', with a long horizontal line extending to the right.

Robert A. Geddes

**U.S. Department of Labor**

Employee Benefits Security Administration  
Seattle District Office  
300 Fifth Avenue, Suite 1110  
Seattle, WA 98104

Reply to the Attention of: 71-010118  
Tonya Hanson, Investigator  
(206) 757-6637

June 14, 2012

Farwest Freight Systems, Inc., Plan Administrator  
Robert Geddes, former Company President  
Brandis Geddes, Trustee  
P.O. Box 439  
Kapowsin, WA 98344

Re: Farwest Freight Systems, Inc. 401(k) Profit Sharing Plan & Trust  
EIN/PN: 91-0978531/001

Dear Plan Fiduciaries:

The U.S. Department of Labor (the Department) has responsibility for the administration and enforcement of Title I of the Employee Retirement Income Security Act of 1974 ("ERISA"). Title I establishes standards governing the operation of employee benefit plans such as Farwest Freight Systems, Inc. 401(k) Profit Sharing Plan and Trust ("Plan").

This office has concluded its investigation of the Plan and of the activities of Farwest Freight Systems, Inc. ("Company") and you as Plan fiduciaries. Based on the facts gathered during the investigation, it appears that as fiduciaries, you and the Company may have violated several provisions of ERISA. The purpose of this letter is to advise you of our findings and acknowledge your corrective actions.

As we understand the facts, the Company terminated the Plan effective August 31, 2009, and ceased business altogether in or around December 29, 2009. You, Robert Geddes, were the former Company President and Director. According to Plan Documents, the Company was the Plan Administrator with the discretion to interpret and apply the Plan's provisions. You, Robert Geddes, acted on behalf of the Company in its role as Plan Administrator. Brandis Geddes is the Plan's Directed Trustee with control over the Plan's assets. Therefore, the Company and you are fiduciaries of the Plan as that term is defined in ERISA §3(21)(A).

**Abandonment of the Plan**

Our investigation revealed that the Company took action to terminate the Plan effective August 31, 2009. On or around December 2009, the Company went out of business. However, at no point after 2009, did you take steps to ensure that the Plan was properly wound down, with notice to all participants of their right to final distributions. Specifically, our investigation revealed that after 2009, the Plan Recordkeeper as



well as the Custodian lost contact with you and the Company. From 2009 until you were contacted by the Department in the fall of 2010, you and the Company abandoned your responsibilities to the Plan. During this time period, the Plan fiduciaries failed to provide the Plan participants and service providers with their contact information in order to answer any administrative questions relating to the Plan. Further, the fiduciaries made no effort to ensure that the Plan was properly terminated so that Plan monies were accessible to all the participants for distributions or rollovers to other plans. In addition, you and the Company made no effort to locate missing participants.

In our view, the Company's cessation of business did not relieve the Plan's fiduciaries of their ERISA fiduciary duties owed to the Plan and its participants and beneficiaries. We believe the Company's and your failure to administer the Plan for the benefit of participants and beneficiaries is a violation of ERISA §§404(a)(1)(A) and (B).

During the course of our investigation, you took affirmative measures to correct the breaches described above. Specifically, you located plan participants and signed distribution forms for them allowing them to take distributions from their Plan accounts. In addition, you contacted Paychex and gained access to the Plan Administrator website so as to facilitate plan distributions. You also took steps to locate missing participants, including: performing internet searches, checking a variety of different Plan documents and records, emailing former colleagues, and making telephone calls. When you were unable to locate missing participants, you took the additional step of establishing IRA rollover accounts and/or escheating funds as appropriate pursuant to the terms of the Plan and Departmental guidance on missing plan participants. By late May 2012, you ensured all participants who reasonably could be located had been contacted, and received instructions as to how to obtain their final Plan distributions. By June 13, 2012, you ensured that all such participants had received their funds (or in the case of the last, non-missing participant, Joshua Smith, was in the process of confirming receipt of his funds). You also ensured that all thirty four (34) of the remaining participants, who were missing, had been sent letters via the IRS Letter Forwarding program. Finally, you continued to respond to participants as individuals located through the IRS Letter Forwarding process contacted you and Paychex about obtaining final plan distributions.

We note that on June 13, 2012, Paychex confirmed final distributions to all 11 locatable participants. Further, we note that you have forwarded on your IRS letters to Paychex so that all missing participant accounts will be distributed per the Plan.

### **Reporting and Disclosure**

ERISA §103(a)(1)(A) and §104(a)(1) require that Plan Administrators for employee benefit plans file an annual report with the Department within 210 days after the end of each plan year (the Annual Report Form 5500). ERISA §104(b)(3) requires that the Plan Administrator provide a summary of the annual report (Summary Annual Report) to each participant within 210 days of the close of each plan year. ERISA Section 105 requires that individual benefits be furnished automatically to participants. The statements must be provided quarterly and must abide by the format specified in Section 105(a)(2).

Our investigation disclosed that the Plan's Annual Report Forms 5500 have not been filed since the 2008 plan year filing. Additionally, Summary Annual Reports for the same reporting periods were not provided to Plan participants. Further, while participants have daily access to Individual Benefit Statements on Paychex's website, no evidence was provided that these statements contain all of the required language

specified in ERISA Section 105(a)(2) such as an explanation of the importance of a well-balanced portfolio and a notice directing participants to the Department of Labor website for more information. In our opinion, the Plan fiduciaries' failures to file the annual reports, to provide the Summary Annual Reports to participants, and to provide the requisite information in Individual Benefit Statements constitutes violations of ERISA Sections 103, 104, and 105. Because the Plan has been terminated, our office will take no further action with respect to these issues.

Please note, however, that the responsibility for the acceptance or rejection of any Annual Report Form 5500 or any part thereof is delegated to EBSA Office of the Chief Accountant (OCA). That office makes any final decision whether a reporting violation has occurred and should be corrected.

Should you wish to contact the OCA's Division of Reporting Compliance, the address and telephone number are:

U. S. Department of Labor  
Employee Benefits Security Administration  
Office of the Chief Accountant  
Division of Reporting Compliance  
200 Constitution Avenue NW, Suite 400  
Washington, DC 20210  
Telephone #: (202) 693-8364

#### **Fidelity Bond**

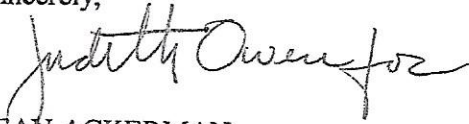
During the course of the investigation, the fiduciaries failed to provide evidence of bonding, and consequently the Department determined that the Plan was not covered under a fidelity bond. Failure to ensure that the Plan fiduciaries and other persons who handle Plan funds are bonded in an amount equal to 10% of the amount of the funds handled constitutes a violation of ERISA §412. As we understand the facts, the Plan has been terminated and all participant account balances have been distributed or are in the final stages of being distributed. Therefore, the Department will take no further action with regard to this issue.

#### **Conclusion**

Our office will take no further action with respect to these matters because you have taken certain corrective actions described above with respect to the wind-up of the Plan. You are cautioned, however, that by agreeing to take no further action with regard to these issues, the Department commits only itself and cannot in any way restrain any other individual or governmental agency from taking any further action it may deem appropriate with respect to either these or other matters.

We hope this letter will be helpful to you in the future should you again become a fiduciary to an ERISA covered plan. Finally, we appreciate the cooperation you have extended to us during the course of this investigation.

Sincerely,

A handwritten signature in cursive script that reads "Judith Owen for".

JEAN ACKERMAN  
Regional Director

Enclosures:

Attachment A – ERISA Sections



07/30/2014

Hello,

In response to the C- 403 form that I received regarding a final filing of a 5500 form for Farwest Freight Systems Inc., for 2012 – I called and spoke with both the Dept. of Labor and the IRS, Mrs. Stead #1001796802, today at great length regarding what would be required to end this and close the plan in its entirety.

I have not been able to confirm from Paychex any outstanding balances as all of their files are archived. However, back in 2012 we sent letters to Paychex as well as the IRS as outlined in the directions for terminating a retirement plan pursuant to the IRS. According to Mrs. Stead, this should be sufficient to establish that "all has been reasonably done" to satisfy the requirements.


Everything has been done to the very best of my ability and knowledge to close this plan out. Up to and including the letters sent to Paychex and the IRS in 2012.

Per my conversation with the IRS representative, Mrs. Stead, and the instructions for terminating the retirement plan - all avenues, to the very best of my knowledge, have been followed. As, the IRS does not notify me of whether or not those letters are received and there is no final zero report available from Paychex - I am left to assume that per the dictates of the plan, that the instructions were followed by Paychex, and the remaining funds were escheated to the State that were not collected, thereby allowing me to complete a final 5500 filing stating that the fund is finally terminated.


I respectfully request that you waive any monetary penalties that may be assessed for a late final filing - as you can read and see from the other attachments, being a plan administrator is not my strong suit and when I asked that the last filing be the final one, I guess I thought it was accepted as I had not heard anything other than the letter from the Dept. of Labor, whose findings regarding the final filing, I must have misunderstood.

Please accept this final 5500 filing as termination of this plan - I understand now that this should have been filed last year. But, as I stated, I thought that Department of Labor's findings ended it. My husband and I are still struggling to recover financially as he is now on disability and I was recently laid off from my job of 3 1/2 yrs.

Thank you very much for your consideration.



Brandis D. Geddes  
PO BOX 210  
Heron, MT 59844  
253-569-1466



Robert A. Geddes  
PO BOX 210  
Heron, MT 59844



7/30/14

Please Note the mailing address listed is the last listed for the Company:

PO BOX 439

Kapowsin, WA 98344

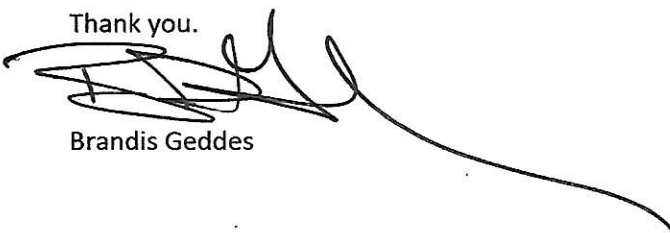
This address will forward for the next 10 months to our new address:

PO BOX 210

Heron, MT 59844

The business is not active which is why I did not alter the address on the 5500 form.

Thank you.

  
Brandis Geddes