

No. C110145	Annual Report Form 19 96 <i>Due No Later Than November 30,</i>		2. Registered Agent and Office NOT A P.O. BOX CHARLES R NELSON SR MILE POST 1 NEWPORT WIG OLDTOWN ID 83822																								
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED ** FINAL NOTICE **	1. Mailing Address - Please Correct, If Not Correct ARLCO MACHINE & SUPPLY, INC. CHARLES R NELSON SR PO BOX 1118 PRIEST RIVER ID 83856		3. Organized Under the Laws of: ID C110145																								
4. Corporations: Enter Names and Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of ☐ Managers or ☐ Members (check one)																											
<table style="width: 100%; border: none;"> <tr> <th style="text-align: left; width: 15%;">Office held</th> <th style="text-align: left; width: 25%;">Name</th> <th style="text-align: left; width: 35%;">Street or P.O. Address</th> <th style="text-align: left; width: 15%;">City</th> <th style="text-align: left; width: 10%;">State</th> <th style="text-align: left; width: 10%;">Zip</th> </tr> </table>				Office held	Name	Street or P.O. Address	City	State	Zip																		
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5. NATURE OF BUSINESS MACHINE SHOP, MANUFACTURING ANY LAWFUL		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>Arlene L. Nelson</i></u> Date <u>October 15, 1996</u> Name (Typed or Printed) <u>Arlene L. Nelson</u> Title <u>Secretary</u>																									
ISSUED: 10-05-1996		9648																									