

No. 054339 Return To Secretary of State Room 203, Statehouse Boise, ID 83720 88 OCT 12 1988	Idaho Corporation Annual Report Form Due No Later Than November 1, 1988 1. Mailing Address — Please Correct 054339 HOLLISTER HILLS COOPERATIVE PROP JAMES M. MCNAMARA W. 4045 HOLLISTER DR. POST FALLS, IDAHO 83854	2. Registered Agent and Office JAMES M. MCNAMARA W. 4045 HOLLISTER DR. POST FALLS, ID 83854 3. Incorporated Under The Laws of ENTERED OCT 14 1988 STATE OF IDAHO																								
4. Names and Addresses of Officers and Directors <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;"></th> <th style="width: 35%; text-align: center;"><u>Name</u></th> <th style="width: 30%; text-align: center;"><u>Street or P.O. Address</u></th> <th style="width: 10%; text-align: center;"><u>City</u></th> <th style="width: 10%; text-align: center;"><u>State</u></th> <th style="width: 10%; text-align: center;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President:</td> <td>GARY PETERSEN</td> <td>P.O. Box 1171</td> <td>POST FALLS</td> <td>ID</td> <td>83854</td> </tr> <tr> <td>Secretary:</td> <td>PEARL LEE</td> <td>W 4000 HOLLISTER DR</td> <td>POST FALLS</td> <td>ID</td> <td>83854</td> </tr> <tr> <td>Directors:</td> <td>LARRIMORE DAVIDSON</td> <td>W 3840 HOLLISTER DR</td> <td>POST FALLS</td> <td>ID</td> <td>83854</td> </tr> </tbody> </table>				<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President:	GARY PETERSEN	P.O. Box 1171	POST FALLS	ID	83854	Secretary:	PEARL LEE	W 4000 HOLLISTER DR	POST FALLS	ID	83854	Directors:	LARRIMORE DAVIDSON	W 3840 HOLLISTER DR	POST FALLS	ID	83854
	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>																					
President:	GARY PETERSEN	P.O. Box 1171	POST FALLS	ID	83854																					
Secretary:	PEARL LEE	W 4000 HOLLISTER DR	POST FALLS	ID	83854																					
Directors:	LARRIMORE DAVIDSON	W 3840 HOLLISTER DR	POST FALLS	ID	83854																					
5. Nature of Business NON-PROFIT	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>Gary Petersen</u> Name (Typed or Printed) <u>GARY PETERSEN</u> Date <u>10-7-88</u> Title <u>PRESIDENT</u>																									