

| No. <b>C111465</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>Annual Report Form</b> 1995<br><i>Due No Later Than November 30,</i>                                                                                                                                                                              |                                                                                                                                                                                                                                                         | 2. Registered Agent and Office <b>NOT A P.O. BOX</b>                  |       |             |      |                        |      |       |     |       |                 |                |        |    |       |         |                 |                                              |                                    |    |       |         |                |                    |        |    |       |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------|-------|-------------|------|------------------------|------|-------|-----|-------|-----------------|----------------|--------|----|-------|---------|-----------------|----------------------------------------------|------------------------------------|----|-------|---------|----------------|--------------------|--------|----|-------|
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FEE REQUIRED</b><br><br><b>* FIRST NOTICE *</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 1. Mailing Address - Please Correct, If Not Correct                                                                                                                                                                                                  |                                                                                                                                                                                                                                                         | CINDI BAUER<br>2290 MUNDY GULCH<br>PO BOX 26<br>INDIAN VALLE ID 83632 |       |             |      |                        |      |       |     |       |                 |                |        |    |       |         |                 |                                              |                                    |    |       |         |                |                    |        |    |       |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | TRIPLE R CRUSHING INCORPORATED<br>CINDI BAUER<br>2290 MUNDY GULCH<br>PO BOX 26<br>INDIAN VALLEY ID 83632                                                                                                                                             |                                                                                                                                                                                                                                                         | 3. Organized Under the Laws of:<br><br>ID C111465                     |       |             |      |                        |      |       |     |       |                 |                |        |    |       |         |                 |                                              |                                    |    |       |         |                |                    |        |    |       |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 4. Corporations: Enter Names and Addresses of <b>President, Secretary and Directors</b><br>Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> <b>Managers</b> or <input type="checkbox"/> <b>Members</b> (check one) |                                                                                                                                                                                                                                                         |                                                                       |       |             |      |                        |      |       |     |       |                 |                |        |    |       |         |                 |                                              |                                    |    |       |         |                |                    |        |    |       |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Office held</th> <th style="width: 20%;">Name</th> <th style="width: 30%;">Street or P.O. Address</th> <th style="width: 15%;">City</th> <th style="width: 10%;">State</th> <th style="width: 10%;">Zip</th> </tr> </thead> <tbody> <tr> <td>PRES.</td> <td>E. Ralph Wilbur</td> <td>910 S. Moffatt</td> <td>EMMETT</td> <td>ID</td> <td>83617</td> </tr> <tr> <td>V. PRES</td> <td>Robert Amritage</td> <td><del>1487 Mann Creek Rd</del><br/>1010 Hwy 95</td> <td><del>Weiser</del><br/>Indian Valley</td> <td>ID</td> <td>83632</td> </tr> <tr> <td>Sec/Tre</td> <td>R. Ross Tarter</td> <td>1487 Mann Creek Rd</td> <td>Weiser</td> <td>ID</td> <td>83672</td> </tr> </tbody> </table> |                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                         |                                                                       |       | Office held | Name | Street or P.O. Address | City | State | Zip | PRES. | E. Ralph Wilbur | 910 S. Moffatt | EMMETT | ID | 83617 | V. PRES | Robert Amritage | <del>1487 Mann Creek Rd</del><br>1010 Hwy 95 | <del>Weiser</del><br>Indian Valley | ID | 83632 | Sec/Tre | R. Ross Tarter | 1487 Mann Creek Rd | Weiser | ID | 83672 |
| Office held                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Name                                                                                                                                                                                                                                                 | Street or P.O. Address                                                                                                                                                                                                                                  | City                                                                  | State | Zip         |      |                        |      |       |     |       |                 |                |        |    |       |         |                 |                                              |                                    |    |       |         |                |                    |        |    |       |
| PRES.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | E. Ralph Wilbur                                                                                                                                                                                                                                      | 910 S. Moffatt                                                                                                                                                                                                                                          | EMMETT                                                                | ID    | 83617       |      |                        |      |       |     |       |                 |                |        |    |       |         |                 |                                              |                                    |    |       |         |                |                    |        |    |       |
| V. PRES                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Robert Amritage                                                                                                                                                                                                                                      | <del>1487 Mann Creek Rd</del><br>1010 Hwy 95                                                                                                                                                                                                            | <del>Weiser</del><br>Indian Valley                                    | ID    | 83632       |      |                        |      |       |     |       |                 |                |        |    |       |         |                 |                                              |                                    |    |       |         |                |                    |        |    |       |
| Sec/Tre                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | R. Ross Tarter                                                                                                                                                                                                                                       | 1487 Mann Creek Rd                                                                                                                                                                                                                                      | Weiser                                                                | ID    | 83672       |      |                        |      |       |     |       |                 |                |        |    |       |         |                 |                                              |                                    |    |       |         |                |                    |        |    |       |
| 5. NATURE OF BUSINESS<br><br>ROCK & GRAVEL                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                      | 6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.<br>Signature <u>Cindi Bauer</u> Date <u>7-16-96</u><br>Name (Typed or Printed) <u>Cyndi D Bauer</u> Title <u>Bookkeeper</u> |                                                                       |       |             |      |                        |      |       |     |       |                 |                |        |    |       |         |                 |                                              |                                    |    |       |         |                |                    |        |    |       |

ISSUED: 07-05-1995

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