

No. C 89246

## Annual Report Form

1996

Due No Later Than November 30,

2. Registered Agent and Office NOT A P.O. BOX

## Return to:

SECRETARY OF STATE  
700 WEST JEFFERSON  
PO BOX 83720  
BOISE, ID 83720-0080

NO FEE REQUIRED

## 1. Mailing Address - Please Correct, If Not Correct

HOLIDAY FOR HEALTH, INC.  
RAY L. ANDREWS  
P. O. BOX 190RAY L. ANDREWS  
HIGHWAY 12

LOWELL

ID 00000

## 3. Organized Under the Laws of:

ID

C 89246

\* FIRST NOTICE \*

KOOSKIA

ID 83539

4. Corporations: Enter Names and Addresses of
- President, Secretary and Directors**
- 
- Limited Liability Companies: Enter Names and Addresses of
- ☐
- Managers or
- ☐
- Members (check one)

## Office held

## Name

## Street or P.O. Address

## City

## State

## Zip

PRES.	RAY L. ANDREWS	P.O. Box 190	KOOSKIA	ID	83539
SECY	RUTH ANDREWS	P.O. Box 190	KOOSKIA	ID	83539

## 5. NATURE OF BUSINESS

HEALTH PROGRAM

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

RAY L. ANDREWS

Date

8/27/96

Name (Typed or Printed)

RAY L. ANDREWS

Title

PRES

ISSUED: 07-06-1996

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