	INSTRUCTIONS ON REVERSE SIDE	Telefolia de la compansión de la compans
No.103599	Idaho Corporation Annual Report Form	2. Registered Agent and Office NOT A P.O.
Return To	Due No Later Than November 1,	LOWELL VAUSHY
Secretary of State	1. Mailing Address - Please Correct, If Not Correct	1505 WEST BOISE AVE
Room 203, Statehouse Boise, ID 83720	LOWELL VAUSHN PROPERTY MANASEM	90155 ID -8370
** FINAL NOTICE **	1505 WEST BOISE AVE	3. Incorporated Under The Laws
No FEE REQUIRED	301SE ID 83706	of ID NO: 103699
 Names and Addresses of Officer 	s and Directors MUST BE PRINTED C	R TYPED
	Name Street or P.O. Address	
President:	1 Jauchu	<u>City</u> <u>State</u> <u>Zip</u>
Secretary:	> 12109 W Gunsmake I	In Rose IN ATT
President: Lowell Secretary: Shery!	Vaughu > 12104 W Gunsmoke I	on Botte ID 8370
Secretary: Shary I	Verythin > 12109 W Grunsmoke I	on Botte ID 8371
Secretary: Shery!	Jaughn > 12109 W Governoke I	on Botte ID 8376
Secretary: Shary I	Jaughn > 12109 W Governoke I	on Botte ID 8376
Secretary: Shary! Directors:	Jaughn > 12109 W Governoke I	on Botte ID 8378
Secretary: Shary! Directors:	Jaughn > 12104 W Governoke I	on Botte ID 8378
Secretary: Shery!	Jaughn > 12109 W Grunsmoke I	on Botte ID 8378
Secretary: Shery! Directors:	Jaughn > 12109 W Grunsmoke I	on Botte ID 837
Secretary: Shary I	Jaughn > 12109 W Grunsmoke I	on Botte ID 837
Secretary: Shary! Directors:	Jaughn > 12109 W Grunsmoke I	on Botte ID 8376
• ·		
Nature of Business	6. I certify that this Appeal D	
• ·	6. I certify that this Annual Report has been exam	
Nature of Business	6. I certify that this Annual Report has been exam true, correct and complete. Signature	nined by me and is to the best of my knowledge
Nature of Business	6. I certify that this Annual Report has been exam	nined by me and is to the best of my knowledge