

No. C 81939	Annual Report Form 1999 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 * FIRST NOTICE *	1. Mailing Address: Please Correct if Not Correct SNAKE RIVER PRESERVATION COU JACQUELINE L. FORSMANN 421 7TH AVENUE LEWISTON ID 83501		JACQUELINE L. FORSMANN 421 7TH AVENUE LEWISTON ID 83501 3. Organized Under the Laws of: ID C 81939																														
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of ☐ Managers or ☐ Members (check one) <table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td></td> <td>Jacqueline L. Forsmann</td> <td>421 7th Ave</td> <td>Lea.</td> <td></td> <td>Id 83501</td> </tr> <tr> <td></td> <td>(President)</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td>John F Forsmann</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td>(Secretary)</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Office held	Name	Street or P.O. Address	City	State	Zip		Jacqueline L. Forsmann	421 7th Ave	Lea.		Id 83501		(President)						John F Forsmann						(Secretary)				
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5. Signature of New Registered Agent		6. Signature <u>Jacqueline L Forsmann</u> Date <u>7/25/99</u> Name (Print) <u>Jacqueline L. Forsmann</u> Title <u>President</u>																															

ISSUED: 07-03-1999

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