

No. <b>C 51846</b>		<b>Due no later than Aug 31, 2011</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>1. Mailing Address: Correct in this box if needed.</b>  FOUSTS, INC. TOM FOUST P O BOX 268 BONNERS FERRY ID 83805-0268		RUTH ANN WILSON 512617 HWY 95 BONNERS FERRY ID 83805			
						3. <u>New</u> Registered Agent Signature:*	
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	TOM C FOUST	PO BOX 915	BONNERS FERRY	ID	USA	83805-0915	
SECRETARY	ANITA L. FOUST	PO BOX 915	BONNERS FERRY	ID	USA	83805-0915	
DIRECTOR	TOM C. FOUST	PO BOX 915	BONNERS FERRY	ID	USA	83805-0915	
DIRECTOR	ANITA L. FOUST	P.O. BOX 915	BONNERS FERRY	ID	USA	83805-0915	
5. Organized Under the Laws of:  <b>ID</b> <b>C 51846</b>		6. Annual Report must be signed.*  Signature: Tom C. Foust Name (type or print): Tom C. Foust					
		Date: 08/02/2011 Title: President					
Processed 08/02/2011 * Electronically provided signatures are accepted as original signatures.							