




No. C 76910	Annual Report Form Due No Later Than November 30, 1997		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 NADL SANITATION, INC. EMIL NEJDL P. O. BOX 923		EMIL NEJDL 1685 E 10TH N MOUNTAIN HOM ID 83647 3 Organized Under the Laws of																			
* FIRST NOTICE * MOUNTAIN HOM ID 83647 ID C 76910																						
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one) <table border="1" data-bbox="41 372 1486 585"> <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>PRESIDENT</td> <td>EMIL NEJDL</td> <td>P.O. BOX 923</td> <td>MOUNTAIN HOME</td> <td>IDA</td> <td>83647</td> </tr> <tr> <td>TREASURER + SECRETARY</td> <td>LEILA CROCKETT</td> <td>BOX 511</td> <td>OROFINO,</td> <td>IDA</td> <td>83544</td> </tr> </tbody> </table>					Office held	Name	Street or P.O. Address	City	State	Zip	PRESIDENT	EMIL NEJDL	P.O. BOX 923	MOUNTAIN HOME	IDA	83647	TREASURER + SECRETARY	LEILA CROCKETT	BOX 511	OROFINO,	IDA	83544
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5.	6. <table border="1" data-bbox="553 691 1486 840"> <tr> <td>Signature </td> <td>Date 8-1-1997</td> </tr> <tr> <td>Name (Typed or Printed) EMIL NEJDL</td> <td>Title PRESIDENT</td> </tr> </table>				Signature 	Date 8-1-1997	Name (Typed or Printed) EMIL NEJDL	Title PRESIDENT														
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ISSUED: 07-04-1997 ↙ DO NOT TAPE OR STAPLE ↘

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