

155020, 10-01-1992

No. 82819	Idaho Corporation Annual Report Form	2. Registered Agent and Office NOT A P.O. BOX																				
Return To	Due No Later Than November 1992	RUSSELL R. BARTON 650 THAIN RD																				
REINSTATEMENT NOTICE ** NO FEE REQUIRED	1 Mailing Address — Please Correct, If Not Correct	LEWISTON ID 83501 0000																				
	BARTON BROS. CYCLE, INC. RUSSELL R. BARTON 650 THAIN RD LEWISTON ID 83501 0000	3. Incorporated Under The Laws of ID NO: 82819																				
4. Names and Addresses of Officers and Directors																						
President: <i>Phillip W. BARTON</i> Secretary: <i>Russell R. BARTON</i> Directors: <i>Treas: Kathy E. BARTON</i>	<table border="1"> <thead> <tr> <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><i>423 Linden Dr.</i></td> <td><i>LEWISTON</i></td> <td><i>Id.</i></td> <td><i>83501</i></td> </tr> <tr> <td></td> <td><i>1510 Burrell Ave</i></td> <td><i>LEWISTON</i></td> <td><i>Id.</i></td> <td><i>83501</i></td> </tr> <tr> <td></td> <td><i>1510 Burrell Ave</i></td> <td><i>LEWISTON</i></td> <td><i>Id.</i></td> <td><i>83501</i></td> </tr> </tbody> </table>	Name	Street or P.O. Address	City	State	Zip		<i>423 Linden Dr.</i>	<i>LEWISTON</i>	<i>Id.</i>	<i>83501</i>		<i>1510 Burrell Ave</i>	<i>LEWISTON</i>	<i>Id.</i>	<i>83501</i>		<i>1510 Burrell Ave</i>	<i>LEWISTON</i>	<i>Id.</i>	<i>83501</i>	
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5. Nature of Business <i>Sale of New + Used Motorcycles + Accessories</i>	6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. <table border="0"> <tr> <td>Signature <i>Kathy E. Barton</i></td> <td>Date <i>12-16-92</i></td> </tr> <tr> <td>Name (Typed or Printed) <i>KATHY E. BARTON</i></td> <td>Title <i>Treasurer</i></td> </tr> </table>		Signature <i>Kathy E. Barton</i>	Date <i>12-16-92</i>	Name (Typed or Printed) <i>KATHY E. BARTON</i>	Title <i>Treasurer</i>																
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