No. 22968	INSTRUCTIONS ON REVERSE SIDE  Idaho Corporation Annual Report Form  Due No. Leter Then Mountain Report Form  2. Registered Agent and Office NOT A P.O. B.					
Return To	Due No Later Th	Due No Later Than November 1,		GRANT 5 CHOTOTO		
Secretary of State	A STATE OF THE STA		124 WEST	GRANT F. CHRISTENSEN 124 WEST 50 SOUTH		
Room 203, Statehouse Boise, ID 83720 * FIRST NOTICE *	BINGHAM COUNTY MOUNTED SHERIFF PRANT F. CHRISTENSEN 124 WEST 50 SOUTH		BLACKFOOT ID 83221  3. Incorporated Under The Laws			
NO FEE REQUIRED	BLACKFOOT	ID 83221	of ID			
. Names and Addresses of Officers	and Directors					
	Name	MUST BE PRINTED	OR TYPED			
President: WILLIAM D CURTI	_	Street or P.O. Address	City	State	Zip	
Secretary: MOONIE COFFEY Directors: MICHELLE-GIBSON VICE PRES.	P.0	WEST 300 SOUTH BOX 765 ROYAL ST.	BLA CKFCOT	IDAHO	83221	
TOP HAND BORMAN MEDICAL	MERLETTE TOP	I.mom etc.		Ħ	Ħ	
TOP HAND FORMAN-MICHAEL MERLETTE 128 WEST SO SOUTH ASST. DRILL MA TER GRANT F. CHRISTENSEN -124 WEST 50 SOUTH HEGISTERED AGENT			**	tt	#	
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Nature of Business	B I certify that the					
NON PROFIT RIDING CLUB	Signature	his Annual Report has been examind complete.	nined by me and is to the		cnowledge	
	Name Printed OF	ANT F CHRISTENSEN	Oate )	(~00J \ \AT	<i>4</i>	