

Annual Report Form
Due No Later Than November 30,

(If 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

ROBERT H. REMAKLUS, LAWYER,
ROBERT H. REMAKLUS
P. O. BOX 759

CASCADE ID 83611

ROBERT H. REMAKLUS
104 WEST CASCADE

CASCADE ID 83611

3. Organized Under the Laws of:

ID C 50473

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)

Office held

Name

Street or P.O. Address

City

State

Zip

PRESIDENT	ROBERT H. REMAKLUS	P.O. BOX 759	CASCADE	ID	83611
SEC/TREAS	CHARLENE M. FUNKHOUSER	P.O. BOX 759	CASCADE	ID	83611

5. Signature of New Registered Agent

6.

Signature

Name (Typed or Printed)

Charlene M. Funkhouser 7-28-98
CHARLENE M. FUNKHOUSER SEC/TREAS

ISSUED: 07-03-1998

13507

DO NOT TAPE OR STAPLE