No. C 79653	Annual Report Form Due No Later Than November 30,		Agent and Office NC	T A P.O. BOX
Return to: SECRETARY OF STATE 700 WEST JEFFERSON	Mailing Address - Please Correct, If Not Correct BY OWNER, INC.		L. WALL APPLEWAY	
PO BOX 83720 BOISE, ID 83720-0080	JERRY L. WALL 501 W APPLEWAY	COEUR	D'ALEN ID	83814
NO FEE REQUIRED	APPLEWAY SQUARE	3. Organized l	Inder the Laws of:	
** FINAL NOTICE **	COEUR D"ALENE ID 8381	4 OR	c 7	9653
Limited Liability Companies: Ent		rs Members (check one)		
Office held Name	Street or P.O. Address	<u>City</u>	<u>State</u>	Zip
	L. Wall P.O. Box 1655 Ann Wall P.O. Box 1655	Hayden Hayden	ID ID	83835 83835
	L. Wall """ "Ann Wall """	** **	*** **	. **
NATURE OF BUSINES	6. I certify that this Annual Report knowledge true gerrect and gon	has been examined by r	ne and is to the b	est of my
FRANCHISOR	Name Typed of JEDRY L.	\ \ \\ .	: 10/15/196 President	
155UED: 10-05-19	998	**************************************	2265	<u>'</u>
	✓ DO NOT TAPE OR STA	APLE J	2203	
				1980a e