

No. C 96465	Annual Report Form Due No Later Than November 30, 1996		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 * FIRST NOTICE *	1. Mailing Address - Please Correct, If Not Correct HELMICH INDUSTRIES, INC. KIM HELMICH PO BOX 156 RIGGINS ID 83549		WILLIAM M KILLEN PO BOX 40 MCCALL ID 83638																		
			3. Organized Under the Laws of: ID C 96466																		
	4. Corporations: Enter Names and 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" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;"><u>Office held</u></th> <th style="width: 25%;"><u>Name</u></th> <th style="width: 35%;"><u>Street or P.O. Address</u></th> <th style="width: 10%;"><u>City</u></th> <th style="width: 10%;"><u>State</u></th> <th style="width: 5%;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Kim L. Helmich</td> <td>P.O. Box 156</td> <td>Riggins</td> <td>ID</td> <td>83549</td> </tr> <tr> <td>Secretary - Treasurer</td> <td>Terrie K. Helmich</td> <td>P.O. Box 156</td> <td>Riggins</td> <td>ID</td> <td>83549</td> </tr> </tbody> </table>				<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President	Kim L. Helmich	P.O. Box 156	Riggins	ID	83549	Secretary - Treasurer	Terrie K. Helmich	P.O. Box 156	Riggins	ID	83549
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Secretary - Treasurer	Terrie K. Helmich	P.O. Box 156	Riggins	ID	83549																
5. NATURE OF BUSINESS LOGGING & MILL PRODUCTS	6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. Signature <u><i>Kim L. Helmich</i></u> Date <u>7-22-96</u> Name (Typed or Printed) <u>Terrie K. Helmich</u> Title <u>Secretary</u>																				
ISSUED: 07-06-1996		11739																			