| c 57098 | | Report Form 19 | 2. Registe | red Agent ar | nd Office NO | T A P.O. BO |
|--|---|--|------------------------|---|--------------------------------|---------------|
| eturn to: | Due No Later Than November 30, 1. Mailing Address - Please Correct, If Not Correct | | | ANTHONY E BARNES | | |
| SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | EARL BARNES, ANTHONY E BA 4305 E 3800 | RNES | HANS | SEN | ID | 83334 |
| NO FEE REQUIRED FIRST NOTICE * | HANSEN ID 83334 | | | 3. Organized Under the Laws of: 15 C 57098 | | |
| Corporations: Enter Names and Limited Liability Companies: Enter | | | bers (check one | -) | | • |
| | | t or P.O. Address | City | · !** | State | Zip " |
| Office held Name | Stree | COLI.O.FIGURAGO | | | | |
| Office held Name | E Brown 43 | 65 E 3800 H | +6 | - | A T | 83334 |
| Perident Arthur | 7 E. Burnes 43 | 65 E 3800 H | there | - | | 8270 |
| President Anthon Secretary Hark | TE. Burnes 43 0. Burnes 15 | 105 E 3800 H 142 Independe | the 30 | ise | 位位 | 8370 |
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| President Anthon Secretary Hark | TE. Barnes 43 0. Barnes 15 | 192 Independe | thens nee 30 | ise | 角分 | 8374 8374 |
| NATURE OF BUSINES | E. Surnes 43 O. Barnes 13 6. I certify the knowledge | nat this Annual Report has be true, correct and complete | een examined | by me and | d is to the b | |
| President Anthon Scarctury Hark | E. Surves 43 O. Surves 13 S. 6. I certify the knowledge Signature | nat this Annual Report has be true, correct and complete | een examined | | d is to the by fully President | |
| President Anthon Scarctury Hark | 6. I certify the knowledge Signature Name Print | nat this Annual Report has be true, correct and complete | een examined | by me and | d is to the by Resident | |