

No. C 71903	Annual Report Form 1996 Due No Later Than November 30,		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 ** FINAL NOTICE **	1. Mailing Address - Please Correct, If Not Correct ADAMS, INC. B. ROBERT ADAMS P O BOX 195		B. ROBERT ADAMS 13964 N 175 E RIRIE ID 83443
	RIRIE ID 83443		3. Organized Under the Laws of: ID C 71908

4. Corporations: Enter Names and 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
PRES	MIKE B. ADAMS	Box 195 14020 N. 175 E.	RIRIE	IA.	83443
V. PRES	ROBERT ADAMS	Box 195 13964 N. 175 E.	RIRIE	ID	83443
SECY.	NITA ADAMS	Box 195 14020 N. 175 E.	RIRIE	ID	83443
TAS.	MARLA ADAMS	Box 195 13964 N. 175 E.	RIRIE	IA	83443

5. NATURE OF BUSINESS SPRAY FOAM INSULATION	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>Robert Adams</u> Date <u>10/28/96</u> Name (Typed or Printed) <u>ROBERT ADAMS</u> Title <u>V. PRES</u>
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ISSUED: 10-05-1996

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