


No.	Idaho Corporation Annual Report Form		2. Registered Agent and Office NOT A P.O. BOX	
Return To  <b>Secretary of State</b> <b>Room 203, Statehouse</b> <b>Boise, ID 83720</b>  <b>* FIRST NOTICE *</b> <b>NO FEE REQUIRED</b>	Due No Later Than November 1, 1992		<b>T.W. STIVERS</b> <b>163 FOURTH AVENUE NORTH</b>  <b>TWIN FALLS ID 83301</b>	
	1. Mailing Address - Please Correct If Not Correct			
	<b>CAPELLA CORP.</b> <b>T W STIVERS</b> <b>163 FOURTH AVENUE NORTH</b>  <b>TWIN FALLS ID 83301 0000</b>		3. Incorporated Under The Laws of <b>ID</b> <b>NO: 83723</b>	
4. Names and Addresses of Officers and Directors				
	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u> <u>Zip</u>
President:	T. W. Stivers	165 4th Ave North	Twin Falls	ID 83301
Secretary:	Kris Gauss	P.O. Box AF	McCall	ID 83638
Directors:	T. W. Stivers			
	Winifred Stivers			
	Kris Gauss			
5. Nature of Business <b>Export Marketing</b>		6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.  <div style="display: flex; justify-content: space-between;"> <div>           Signature             Name (Typed or Printed) <input checked="" type="checkbox"/> T. W. Stivers         </div> <div>           Date <input checked="" type="checkbox"/> July 20, 1992            Title <input checked="" type="checkbox"/> President         </div> </div>		