


No. C 61444	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	1. Mailing Address - Please Correct, If Not Correct <div style="border: 1px solid black; padding: 5px; margin: 5px 0;"> CLIFF ACKERMAN, INCORPORATED CLIFF ACKERMAN HCR 5, BOX 147-A </div>		<div style="border: 1px solid black; padding: 5px; margin: 5px 0;"> CLIFF ACKERMAN HCR 5, BOX 147A </div>
	<div style="border: 1px solid black; padding: 5px; margin: 5px 0;"> CLIFF ACKERMAN, INCORPORATED CLIFF ACKERMAN HCR 5, BOX 147-A </div>		<div style="border: 1px solid black; padding: 5px; margin: 5px 0;"> PRIEST RIVER ID 83856 </div>
* FIRST NOTICE *			
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)			
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>
<u>State</u>	<u>Zip</u>		
PRESIDENT	CLIFF ACKERMAN	HCR 5, BOX 147A	PRIEST RIVER
SECRETARY	VIRGINIA ACKERMAN	HCR 5, BOX 147A	PRIEST RIVER
			ID 83856
			ID 83856
5. NATURE OF BUSINESS EXCAVATING		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  Date <u>7-15-96</u> Name (Typed or Printed) <u>VIRGINIA ACKERMAN</u> Title <u>SECRETARY</u>	

ISSUED: 07-06-1996

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