

No. <i>Return To</i> Secretary of State Room 203, Statehouse Boise, ID 83720 * FIRST NOTICE * NO FEE REQUIRED	Idaho Corporation Annual Report Form <i>Due No Later Than November 1, 1992</i> 1 Mailing Address — Please Correct If Not Correct OWEN DISTRIBUTORS, INC. SHARON WARD BOX 2445 IDAHO FALLS ID 83402 0000	2 Registered Agent and Office NOT A P.O. BOX SHARON T. WARD 295 S. EASTERN AVE. IDAHO FALLS ID 83402 3. Incorporated Under The Laws of NO: 45312
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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:	S. T. WARD	295 S. EASTERN AVE.	IDAHO FALLS	ID	83402
Secretary:	L. W. FELTS	"	"	"	"
Directors:	WARD				
	S. T. WARD				
	L. W. FELTS				
	M. L. WARD	"	"	"	"
	B. L. THOMPSON	"	"	"	"

5. Nature of Business SALES OF CARPET, HOME & BUSINESS FURNISHINGS	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>Sharon T. Ward</u> Date <u>7/29/92</u> Name (Typed or Printed) <u>Sharon T. Ward</u> Title <u>Pres.</u>
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