

No. C113811

Annual Report Form

Due No Later Than November 30,

1996

Return to:

SECRETARY OF STATE
700 WEST JEFFERSON
PO BOX 83720
BOISE, ID 83720-0080

NO FEE REQUIRED

* FIRST NOTICE *

1. Mailing Address - Please Correct, If Not Correct

JADE AUTO CLINIC, INC.
WADE G ALLRED
PO BOX 2703

POCATELLO ID 83205

2. Registered Agent and Office NOT A P.O. BOX

WADE G ALLRED
1359 YELLOWSTONE AVE

POCATELLO ID 83201

3. Organized Under the Laws of:

ID C113811

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/DIR

WADE G ALLRED

2692 Bragg Rd

AMERICAN FALLS

Id

83211

SECY/DIR

JOAN M ALLRED

2692 Bragg Rd

AMERICAN FALLS

Id

83211

VPRES/DIR

RONALD C ALLRED

252 Noah

Chubbuck

Id

83202

5.

NATURE OF BUSINESS

COLLISION REPAIR
ANY LAWFUL

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 WADE G ALLRED

Date 14/1996

Name (Type or Printed) WADE G ALLREDTitle per

ISSUED: 07-06-1995

1403