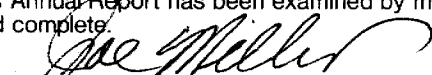
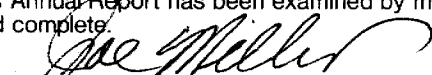
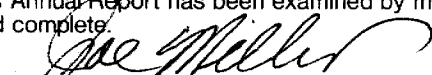


<b>No.</b> 34317	<b>Idaho Corporation Annual Report Form</b> Due No Later Than November 1, 1994		ISSUED: 07-05-1994			
Return To  <b>Secretary of State</b> <b>Room 203, Statehouse</b> <b>P.O. BOX 83720</b> <b>Boise, ID 83720-0080</b> * FIRST NOTICE * NO FEE REQUIRED	<b>1. Mailing Address —</b> SPIRIT LAKE VOLUNTEER AMBULANCE JOSEPH MILLER P.O. BOX 384  SPIRIT LAKE ID 83869		<b>2. Registered Agent and Office</b> DAVID C. ACKLEY 114 10TH STREET  PRIEST RIVER ID 83856			
	<b>3. Incorporated Under The Laws</b> of ID NO: 34317					
<b>4. Names and Addresses of Officers and Directors</b> <b>MUST BE PRINTED OR TYPED</b>						
	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	
President:	Joe Miller	P.O. Box 279	Spirit Lake	Id	83869	
Secretary:	Debbie Fox	P.O. Box 627	Spirit Lake	Id	83869	
Directors:	Cindy Thomas	P.O. Box 635	Spirit Lake	Id	83869	
	Esther Twilleager	N 28225 Ramsey, RD	Athol	Id	83801	
	Bradley Pendelton	HC Rt 1 Box 116	Spirit Lake	Id	83869	
	Dale Holden	W 1351 Lone Mtn Rd	Athol	Id	83801	
	Mary Ealy	P.O. Box 393	Spirit Lake	Id	83869	
<b>5. Nature of Business</b>  Ambulance		<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.</b>  <table style="width: 100%;"> <tr> <td style="width: 50%;">           Signature             Name (Typed or Printed) <u>JOE MILLER</u> </td> <td style="width: 50%;">           Date <u>8-4-94</u>            Title <u>PRESIDENT</u> </td> </tr> </table>			Signature  Name (Typed or Printed) <u>JOE MILLER</u>	Date <u>8-4-94</u> Title <u>PRESIDENT</u>
Signature  Name (Typed or Printed) <u>JOE MILLER</u>	Date <u>8-4-94</u> Title <u>PRESIDENT</u>					