No.	Idaho Corporation Annual Report Form	2. Registered Agent and Office NOT A P.O. BO
Return To  Secretary of State Room 203, Statehouse Boise, ID 83720	Due No Later Than November 1,	SAMUEL STORCK
		4100 PIERCE PARK LANE
	1 Mailing Address = Please Correct, If Not Correct	5051 mynuliew Dr
	STORCK'S CORPORATION SAMUEL STORCK	BOISE ID 83705/
	5051 MOUNTAIN VIEW DRIVE	3. Incorpo@od Under The Laws
* FIRST NOTICE * NO FEE REQUIRED	BOISE ID 83704 0000	of NO. 80/47
NO FEE REGULARD	10 83/04 0000	NO: 89467
. Names and Addresses of Officer	s and Directors	
	Name Street or P.O. Address	City State 7in
		Was Basis Od 0220
President: Samu	rel Storck 5051 Mountal	n Vice Bowie Id. 83709
President: Samu	rel Storck 505/ Mountal	in View De Bowie Id. 83709
Secretary:	uel Storck 505/ Mountai	n Vice Da Bowie Id. 83769
President: Samu Secretary: Directors: Darle	uel Storck 5051 Mountal	n Vice Da Bowie Id. 83769
Secretary:	uel Storck 5051 Mountal	n Vice Da Bowie Id. 83769
Secretary:	uel Storck 5051 mountell one Storck	n Vicu Da Bowie Id. 83709
Secretary:	uel Storck 5051 Mountal	n Vice Da Bowie Id. 83769
Secretary:	uel Storck 5051 Mountal	n View Da Bowie Id. 83764
Secretary:	uel Storck 5051 Mountal	n View Da Bowie Id. 83709
Secretary:	rel Storck 5051 Mountal	n View Da Bowie Id. 83709
Secretary:	rel Storck 5051 Mountal	n Vicu Da Bowie Id. 83769
Secretary: Directors:  Darle	ine Storek	4
Secretary: Directors:  Darle	6. I certify that this Annual Report has been exa	mined by me and is to the best of my knowledge
Secretary: Directors:  Darle  Nature of Business	6. I certify that this Annual Report has been exa	imined by me and is to the best of my knowledge
Secretary:	6. I certify that this Annual Report has been exa	Imined by me and is to the best of my knowledge  Date 10-10-62