

No. C 81204	Annual Report Form 1997 <i>Due No Later Than November 30,</i>		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 * FIRST NOTICE *	1 Mailing Address - Please Correct, If Not Correct PIONEER TOURS, INC. SHIRLEYANNE MARTENS 4872 N ANCHOR AVE 5606 ELLENS FERRY BOISE ID 83703		SHIRLEYANNE MARTENS 4872 N ANCHOR AVE 5606 ELLENS FERRY BOISE ID 83703																								
	3 Organized Under the Laws of: ID C 81204																										
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of ☐ Managers or ☐ Members (check one)																											
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;">Office held</th> <th style="width: 30%;">Name</th> <th style="width: 30%;">Street or P.O. Address</th> <th style="width: 10%;">City</th> <th style="width: 10%;">State</th> <th style="width: 10%;">Zip</th> </tr> </thead> <tbody> <tr> <td>Pres.</td> <td>Shirleyanne Martens</td> <td>5606 Ellens Ferry</td> <td>Boise</td> <td>ID</td> <td>83703</td> </tr> <tr> <td>Sec.</td> <td>Shirleyanne Martens</td> <td>5606 Ellens Ferry</td> <td>Boise</td> <td>ID</td> <td>83703</td> </tr> <tr> <td>Dir.</td> <td>Shirleyanne Martens</td> <td>5606 Ellens Ferry</td> <td>Boise</td> <td>ID</td> <td>83703</td> </tr> </tbody> </table>				Office held	Name	Street or P.O. Address	City	State	Zip	Pres.	Shirleyanne Martens	5606 Ellens Ferry	Boise	ID	83703	Sec.	Shirleyanne Martens	5606 Ellens Ferry	Boise	ID	83703	Dir.	Shirleyanne Martens	5606 Ellens Ferry	Boise	ID	83703
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5.	6. Signature <u>Shirleyanne Martens</u> Date <u>8-7-97</u> Name (Typed or Printed) <u>Shirleyanne Martens</u> Title <u>OWNER</u>																										

ISSUED: 07-04-1997

↓ DO NOT TAPE OR STAPLE ↓

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