

No. 84411	Idaho Corporation Annual Report Form Due No Later Than November 1, 1991	2. Registered Agent and Office NOT A P.O. BOX																									
Return To Secretary of State Room 203, Statehouse Boise, ID 83720 NO FEE REQUIRED		1 Mailing Address: <i>Please Correct If Not Correct</i>	GARY K. SHOEMAKER 7480 DENVER ROAD FRUITLAND ID 83619																								
	G & B SERVICES, INC. GARY K. SHOEMAKER 7480 DENVER ROAD FRUITLAND ID 83619	3. Incorporated Under The Laws of ID NO: 084411 84411																									
4. Names and Addresses of Officers and Directors																											
<table border="1"> <thead> <tr> <th data-bbox="26 388 409 441"></th> <th data-bbox="409 388 735 441"><u>Name</u></th> <th data-bbox="735 388 1060 441"><u>Street or P.O. Address</u></th> <th data-bbox="1060 388 1313 441"><u>City</u></th> <th data-bbox="1313 388 1445 441"><u>State</u></th> <th data-bbox="1445 388 1609 441"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td data-bbox="26 441 409 484">President:</td> <td data-bbox="409 441 735 484">GARY K. SHOEMAKER, CHU</td> <td data-bbox="735 441 1060 484">7480 Denver Road</td> <td data-bbox="1060 441 1313 484">Fruitland</td> <td data-bbox="1313 441 1445 484">ID</td> <td data-bbox="1445 441 1609 484">83619</td> </tr> <tr> <td data-bbox="26 484 409 526">Secretary:</td> <td data-bbox="409 484 735 526">Bart F. Bailey</td> <td data-bbox="735 484 1060 526">132 W. Court</td> <td data-bbox="1060 484 1313 526">Weiser</td> <td data-bbox="1313 484 1445 526">ID</td> <td data-bbox="1445 484 1609 526">83672</td> </tr> <tr> <td data-bbox="26 526 409 835">Directors:</td> <td data-bbox="409 526 735 835"></td> <td data-bbox="735 526 1060 835"></td> <td data-bbox="1060 526 1313 835"></td> <td data-bbox="1313 526 1445 835"></td> <td data-bbox="1445 526 1609 835"></td> </tr> </tbody> </table>					<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President:	GARY K. SHOEMAKER, CHU	7480 Denver Road	Fruitland	ID	83619	Secretary:	Bart F. Bailey	132 W. Court	Weiser	ID	83672	Directors:					
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5. Nature of Business <i>Insurance and Financial Services</i>	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 <i>Gary K. Shoemaker</i> Name (Typed or Printed) GARY K. SHOEMAKER	Date 10/4/91 Title President																									