		oration Annual Report Form	2. Registered Agent and Office NOT A P.O. BC	
Return To Secretary of State Room 203, Statehouse Boise, ID 83720	Due No Later Than November 1,		LONNIA HENSLEY 227 WASHINGTON STREET	
		3. Incorporated Under The Laws		
* FIRST NOTICE * NO FEE REQUIRED	PRIEST RI	VER - ID 83856	of ID NO: 55436	
Names and Addresses of Officer	s and Directors	MUST BE PRINTED O		
	Name	Street or P.O. Address	City	State Zio
President: Lonnia J.	Hensley	P.O.B. x 1321	Priest River	
Secretary: Allice L. Sa Directore: —	vage	P.O. BOX 1005	Priest River	ID 8385L
Lois Hensley		306 874	Priest River	ID 83856
		P.O. BOX 477	Priest River	IU 83856
Pansy Marinan		401 N. Spokane Ave	Newport	Wa 99156
Nature of Business fon - Profit Sr Cit	fizen   6. I certif true, c	y that this Annual Report has been exam orrect and complete.	ined by me and is to the b	est of my knowledge
organization	Signature	Lonna & bena	leg Date 10	-11-93
	Name (1)	Lonnia J. Hensley	Title Poo	sident