

No. 012495	Idaho Corporation Annual Report Form Due No Later Than November 1, 1987		2. Registered Agent and Office MARGARET DRAKE RT. 1, BOX 58 HORSESHOE BEND, IDAHO 83629																														
Return To Secretary of State Room 203, Statehouse Boise, ID 83720	1. Mailing Address — Please Correct 012495 HORSE SHOE BEND MUTUAL IMPROVEME HORSESHOE BEND MUTUAL IMP BOX 282 HORSESHOE BEND, IDAHO 83629		3. Incorporated Under The Laws of ENTERED OCT 6 1987 STATE OF IDAHO																														
	4. Names and Addresses of Officers and Directors <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th style="width: 15%;">Name</th> <th style="width: 35%;">Street or P.O. Address</th> <th style="width: 20%;">City</th> <th style="width: 15%;">State</th> <th style="width: 15%;">Zip</th> </tr> </thead> <tbody> <tr> <td>President: <i>Patricia Bean</i></td> <td><i>P.O. Box 394</i></td> <td><i>Horseshoe Bend,</i></td> <td><i>ID</i></td> <td><i>83629</i></td> </tr> <tr> <td>Secretary: <i>Jessie Quinn</i></td> <td><i>RT 1 Box 0F</i></td> <td><i>"</i></td> <td><i>"</i></td> <td><i>"</i></td> </tr> <tr> <td>Directors: <i>Zella Olsen</i></td> <td><i>City</i></td> <td><i>"</i></td> <td><i>"</i></td> <td><i>"</i></td> </tr> <tr> <td><i>Bonnie Waymynen</i></td> <td><i>City</i></td> <td><i>"</i></td> <td><i>"</i></td> <td><i>"</i></td> </tr> <tr> <td><i>Margaret Drake</i></td> <td><i>RT 1 Box 58</i></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Name	Street or P.O. Address	City	State	Zip	President: <i>Patricia Bean</i>	<i>P.O. Box 394</i>	<i>Horseshoe Bend,</i>	<i>ID</i>	<i>83629</i>	Secretary: <i>Jessie Quinn</i>	<i>RT 1 Box 0F</i>	<i>"</i>	<i>"</i>	<i>"</i>	Directors: <i>Zella Olsen</i>	<i>City</i>	<i>"</i>	<i>"</i>	<i>"</i>	<i>Bonnie Waymynen</i>	<i>City</i>	<i>"</i>	<i>"</i>	<i>"</i>	<i>Margaret Drake</i>	<i>RT 1 Box 58</i>		
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5. Nature of Business NON-PROFIT ORGANIZATION	6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. <table style="width: 100%;"> <tr> <td style="width: 70%;">Signature <i>Beverly D. McRill</i></td> <td style="width: 30%;">Date <i>10-2-87</i></td> </tr> <tr> <td>Name (Typed or Printed) <i>Beverly D. McRill</i></td> <td>Title <i>TREAS.</i></td> </tr> </table>				Signature <i>Beverly D. McRill</i>	Date <i>10-2-87</i>	Name (Typed or Printed) <i>Beverly D. McRill</i>	Title <i>TREAS.</i>																									
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