

## INSTRUCTIONS ON REVERSE SIDE

ISSUED: 06-30-1990

No. <u>81950</u>  Return To  <b>Secretary of State</b> <b>Room 203, Statehouse</b> <b>Boise, ID 83720</b>  <b>NO FEE REQUIRED</b>	<b>Idaho Corporation Annual Report Form</b> <i>Due No Later Than November 1, 1990</i> 1. Mailing Address — <i>Please Correct</i>  <b>P &amp; O, INCORPORATED</b> <b>ROBERT D. PLUID</b> <b>HCR 85, BOX 252</b>  <b>BONNERS FERRY ID 83805</b>	2. Registered Agent and Office  <b>ROBERT D. PLUID</b> <b>HCR 85, BOX 252</b>  <b>BONNERS FERRY ID 83805</b> 3. Incorporated Under The Laws of <b>ID</b>  <b>NO: 081950</b>																								
4. Names and Addresses of Officers and Directors <table border="0"> <thead> <tr> <th></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President:</td> <td>Robert D. Pluid</td> <td>HCR 62 Box 119</td> <td>Moyie Springs</td> <td>Id</td> <td>83845</td> </tr> <tr> <td>Secretary:</td> <td>Kimberly A. Pluid</td> <td>11</td> <td></td> <td></td> <td>11</td> </tr> <tr> <td>Directors:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President:	Robert D. Pluid	HCR 62 Box 119	Moyie Springs	Id	83845	Secretary:	Kimberly A. Pluid	11			11	Directors:					
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Directors:																										
5. Nature of Business  <u>Logging</u>	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 border="0"> <tr> <td>Signature</td> <td><u>Robert D. Pluid</u></td> <td>Date</td> <td><u>7-16-90</u></td> </tr> <tr> <td>Name (Typed or Printed)</td> <td><u>Robert D. Pluid</u></td> <td>Title</td> <td><u>President</u></td> </tr> </table>		Signature	<u>Robert D. Pluid</u>	Date	<u>7-16-90</u>	Name (Typed or Printed)	<u>Robert D. Pluid</u>	Title	<u>President</u>																
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