

| No. W 1793 | Annual Report Form 1995 <i>Due No Later Than November 30,</i> | | 2. Registered Agent and Office NOT A P.O. BOX KATHLEEN RYLE HWY 57 & LINCOLN ST PRIEST RIVER ID 83856 | | | | | | | | | | | | | | | | | | | | | | | | |
|---|--|--|--|--------------------|-------------|-------------------------------|-------------|--------------|------------|--|---------------|---------|---------------|----|-------|--|---------------|---------|---------------|----|-------|--|-----------------|---------|---------------|----|-------|
| 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 PRIEST RIVER CLEANERS, LLC KATHLEEN RYLE P O BOX 543 PRIEST RIVER ID 83856 | | 3. Organized Under the Laws of: ID W 1798 | | | | | | | | | | | | | | | | | | | | | | | | |
| 4. Corporations: Enter Names and Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input checked="" type="checkbox"/> Members (check one) | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;"><u>Office held</u></th> <th style="text-align: left;"><u>Name</u></th> <th style="text-align: left;"><u>Street or P.O. Address</u></th> <th style="text-align: left;"><u>City</u></th> <th style="text-align: left;"><u>State</u></th> <th style="text-align: left;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td></td> <td>Kathleen Ryle</td> <td>Box 543</td> <td>Priest River,</td> <td>Id</td> <td>83856</td> </tr> <tr> <td></td> <td>Denice Miller</td> <td>Box 543</td> <td>Priest River,</td> <td>Id</td> <td>83856</td> </tr> <tr> <td></td> <td>Laurence Miller</td> <td>Box 543</td> <td>Priest River,</td> <td>Id</td> <td>83856</td> </tr> </tbody> </table> | | | | <u>Office held</u> | <u>Name</u> | <u>Street or P.O. Address</u> | <u>City</u> | <u>State</u> | <u>Zip</u> | | Kathleen Ryle | Box 543 | Priest River, | Id | 83856 | | Denice Miller | Box 543 | Priest River, | Id | 83856 | | Laurence Miller | Box 543 | Priest River, | Id | 83856 |
| <u>Office held</u> | <u>Name</u> | <u>Street or P.O. Address</u> | <u>City</u> | <u>State</u> | <u>Zip</u> | | | | | | | | | | | | | | | | | | | | | | |
| | Kathleen Ryle | Box 543 | Priest River, | Id | 83856 | | | | | | | | | | | | | | | | | | | | | | |
| | Denice Miller | Box 543 | Priest River, | Id | 83856 | | | | | | | | | | | | | | | | | | | | | | |
| | Laurence Miller | Box 543 | Priest River, | Id | 83856 | | | | | | | | | | | | | | | | | | | | | | |
| 5. SIGNATURE OF CURRENT RA ANY LAWFUL Dry Clean/Laundromat ISSUED: 37-08-1996 | | 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 <u><i>Kathleen A. Ryle</i></u> Date <u><i>10-29-96</i></u> Name <small>(Typed or Printed)</small> <u>Kathleen A. Ryle</u> Title <u>registered Agent</u> <div style="text-align: right;">2077</div> | | | | | | | | | | | | | | | | | | | | | | | | | |