| lo. C1 04620 | Annual Report Form 1997 Due No Later Than November 30, | 2. Registered Agent and Office NOT A P.O. BOX |
|---|---|---|
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON | 1. Mailing Address - Please Correct, If Not Correct | WILLIAM SCHILEREFF 114 N 6TH STREET |
| PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED | AMERICAN ORTHODOX LATHOLIC C WILLIAM - SCHILLEREFF BOX 309 | 059URN ID 87849 |
| * FINAL NOTICE ** | 20000 | 3. Organized Under the Laws of: |
| | OSBURN ID 63849 Addresses of President, Secretary and Directors | ID C104620 |
| Limited Liability Companies: Enter | r Names and Addresses of Managers or Members | (check one) |
| Office held Name | Street or P.O. Address | City State Zip |
| Charles of - Of | fluer - FR. William Schiller OSBURN, I'd 8384 | ace Boy Rag |
| - (Ciscopule -) | Sent II ex | er or so / |
| | 0584EN, Id 8389 | 29 |
| | osbues, Ita 8389 | ;9 ;; |
| | 6. I certify that this Annual Report has been e | • |
| | 6. I certify that this Annual Report has been eknowledge true, correct and complete. Signature | • |
| | 6. I certify that this Annual Report has been eknowledge true, correct and complete. | examined by me and is to the best of my |
| | 6. I certify that this Annual Report has been e knowledge true, correct and complete. Signature | examined by me and is to the best of my |
| | 6. I certify that this Annual Report has been expressed in the complete. Signature William Schull Name (Typed or Printed) | examined by me and is to the best of my |