

No. <u>52552</u> Return To Secretary of State Room 203, Statehouse Boise, ID 83720 NO FEE REQUIRED	Idaho Corporation Annual Report Form Due No Later Than November 1, 1991 1. Mailing Address: <i>Please Correct If Not Correct</i> LYNCH OIL, INC. JAMES C. LYNCH 535 WEST MAIN 411 OVERLAND AVE BURLEY ID 83315	2. Registered Agent and Office NOT A P.O. BOX JAMES C. LYNCH 535 WEST MAIN 411 OVERLAND AVE BURLEY ID 83315 3. Incorporated Under The Laws of ID NO: 052552																								
4. Names and Addresses of Officers and Directors <table border="1"> <thead> <tr> <th></th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>President:</td> <td>JAMES C LYNCH</td> <td>2429 Laurel Dr</td> <td>Burley</td> <td>ID</td> <td>83318</td> </tr> <tr> <td>Secretary:</td> <td>CAROL J. HENSCH</td> <td>Box 796</td> <td>Burley</td> <td>ID</td> <td>83316</td> </tr> <tr> <td>Directors:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Name	Street or P.O. Address	City	State	Zip	President:	JAMES C LYNCH	2429 Laurel Dr	Burley	ID	83318	Secretary:	CAROL J. HENSCH	Box 796	Burley	ID	83316	Directors:					
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Directors:																										
5. Nature of Business Wholesale Food	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>James C. Lynch</i></u> Date <u>7-16-96</u> Name (Typed or Printed) <u>JAMES C LYNCH</u> Title <u>President</u>																									