

| No. 084805 | Idaho Corporation Annual Report Form | 2. Registered Agent and Office | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|--|--|--|------------------|-------|-----|----------------------------|------------------|-------------|----|-------|--------------------------------------|-------------------------|---------------------|---------------|------------------|----------------------------|--------------------|-------------|----|-------|----------------|--------------|-----------|----|-------|------------------------|
| Return To Secretary of State Room 203, Statehouse Boise, ID 83720 RECEIVED SEC. OF STATE 08 JUL 11 AM 10 45 | Due No Later Than November 1, 1988 | TIM MISSAMORE W. 3540 ELK DR. POST FALLS, IDAHO 83854 | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 1. Mailing Address — Please Correct 084805 NORTHWEST TRANSMISSION, INC. TIM MISSAMORE W. 3540 ELK DR. POST FALLS, IDAHO 83854 | | 3. Incorporated Under The Laws of STATE OF IDAHO | | | | | | | | | | | | | | | | | | | | | | | | |
| 4. Names and Addresses of Officers and Directors | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <table border="1"> <thead> <tr> <th data-bbox="426 391 728 438">Name</th> <th data-bbox="728 391 1075 438">Street or P.O. Address</th> <th data-bbox="1075 391 1301 438">City</th> <th data-bbox="1301 391 1405 438">State</th> <th data-bbox="1405 391 1622 438">Zip</th> </tr> </thead> <tbody> <tr> <td data-bbox="426 438 728 485">President: E. L. Missamore</td> <td data-bbox="728 438 1075 485">N 390 Spokane Rd</td> <td data-bbox="1075 438 1301 485">Post Falls,</td> <td data-bbox="1301 438 1405 485">ID</td> <td data-bbox="1405 438 1622 485">83854</td> </tr> <tr> <td data-bbox="426 485 728 532">Secretary: T.L. Missamore</td> <td data-bbox="728 485 1075 532">P.O. Box 831</td> <td data-bbox="1075 485 1301 532">Veradale</td> <td data-bbox="1301 485 1405 532">WA</td> <td data-bbox="1405 485 1622 532">99037</td> </tr> <tr> <td data-bbox="426 532 728 578">Directors: E. L. Missamore</td> <td data-bbox="728 532 1075 578">N. 390 Spokane Rd.</td> <td data-bbox="1075 532 1301 578">Post Falls,</td> <td data-bbox="1301 532 1405 578">ID</td> <td data-bbox="1405 532 1622 578">83854</td> </tr> <tr> <td data-bbox="426 578 728 625">T.L. Missamore</td> <td data-bbox="728 578 1075 625">P.O. Box 831</td> <td data-bbox="1075 578 1301 625">Veradale,</td> <td data-bbox="1301 578 1405 625">WA</td> <td data-bbox="1405 578 1622 625">99037</td> </tr> </tbody> </table> | Name | Street or P.O. Address | City | State | Zip | President: E. L. Missamore | N 390 Spokane Rd | Post Falls, | ID | 83854 | Secretary: T.L. Missamore | P.O. Box 831 | Veradale | WA | 99037 | Directors: E. L. Missamore | N. 390 Spokane Rd. | Post Falls, | ID | 83854 | T.L. Missamore | P.O. Box 831 | Veradale, | WA | 99037 | ENTERED JUL 11 1988 |
| Name | Street or P.O. Address | City | State | Zip | | | | | | | | | | | | | | | | | | | | | | | |
| President: E. L. Missamore | N 390 Spokane Rd | Post Falls, | ID | 83854 | | | | | | | | | | | | | | | | | | | | | | | |
| Secretary: T.L. Missamore | P.O. Box 831 | Veradale | WA | 99037 | | | | | | | | | | | | | | | | | | | | | | | |
| Directors: E. L. Missamore | N. 390 Spokane Rd. | Post Falls, | ID | 83854 | | | | | | | | | | | | | | | | | | | | | | | |
| T.L. Missamore | P.O. Box 831 | Veradale, | WA | 99037 | | | | | | | | | | | | | | | | | | | | | | | |
| 5. Nature of Business Industrial Repair | 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>T.L. Missamore</u> Date <u>7-8-88</u> Name (Typed or Printed) <u>T.L. Missamore</u> Title <u>Secretary</u> | | | | | | | | | | | | | | | | | | | | | | | | | | |