

No. 01227	Idaho Corporation Annual Report Form Due No Later Than November 1, 1991	2. Registered Agent and Office NOT A P.O. BOX																								
Return To Secretary of State Room 203, Statehouse Boise, ID 83720 NO FEE REQUIRED	1. Mailing Address - Please Correct If Not Correct WEST BOISE 87, INC. BILL MULLINS 3713 RAMPART BOISE ID 83704	KAREN SINKINS , DR. BILL MULLINS 770 IRON COURT 3713 RAMPART BOISE ID 83704 3. Incorporated Under The Laws of ID NO: 061227																								
4. Names and Addresses of Officers and Directors																										
<table border="1"> <thead> <tr> <th data-bbox="34 391 710 441"></th> <th data-bbox="710 391 1139 441"><u>Name</u></th> <th data-bbox="1139 391 1338 441"><u>Street or P.O. Address</u></th> <th data-bbox="1338 391 1470 441"><u>City</u></th> <th data-bbox="1470 391 1615 441"><u>State</u></th> <th data-bbox="1615 391 1652 441"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td data-bbox="34 441 710 484">President:</td> <td data-bbox="710 441 1139 484">DR. BILL MULLINS</td> <td data-bbox="1139 441 1338 484">3713 RAMPART</td> <td data-bbox="1338 441 1470 484">BOISE,</td> <td data-bbox="1470 441 1615 484">ID</td> <td data-bbox="1615 441 1652 484">83704</td> </tr> <tr> <td data-bbox="34 484 710 526">Secretary:</td> <td data-bbox="710 484 1139 526">DARREL AVERY</td> <td data-bbox="1139 484 1338 526">8385 MIDLAND</td> <td data-bbox="1338 484 1470 526">BOISE,</td> <td data-bbox="1470 484 1615 526">ID</td> <td data-bbox="1615 484 1652 526">83204</td> </tr> <tr> <td data-bbox="34 526 710 841">Directors:</td> <td data-bbox="710 526 1139 841"></td> <td data-bbox="1139 526 1338 841"></td> <td data-bbox="1338 526 1470 841"></td> <td data-bbox="1470 526 1615 841"></td> <td data-bbox="1615 526 1652 841"></td> </tr> </tbody> </table>				<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President:	DR. BILL MULLINS	3713 RAMPART	BOISE,	ID	83704	Secretary:	DARREL AVERY	8385 MIDLAND	BOISE,	ID	83204	Directors:					
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Directors:																										
5. Nature of Business NC	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>Billy Mullins</u> Date _____ Name (Typed or Printed) <u>BILL MULLINS</u> Title <u>PRESIDENT</u>																									