

No. C 55050	Annual Report Form Due No Later Than November 30, 1995		2. Registered Agent and Office NOT A P.O. BOX ROBERT O. WOLFE 435 N. MAIN 760 E 15th No MOUNTAIN HOM ID 83647	
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 MOUNTAIN HOME OIL, INC. ROBERT OWEN WOLFE 760 EAST 15TH NORTH MOUNTAIN HOME ID 83647		3. Organized Under the Laws of: ID C 55050	
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 type="checkbox"/> Members (check one)				
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u> <u>Zip</u>
President/ Director	Robert O. Wolfe	760 East 15th North	Mtn. Home	ID 83647
Secretary/ Treasurer/ Director	Ethel D. Wolfe	760 East 15th North	Mtn. Home	ID 83647
5. NATURE OF BUSINESS OIL JOBBER		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>Ethel Wolfe</u> Date <u>8/28/96</u> Name (Typed or Printed) <u>Ethel Wolfe</u> Title <u>Sec./Treas.</u>		

ISSUED: 07-06-1995

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