

No. W 1719	Annual Report Form 1996 Due No Later Than November 30,		2. Registered Agent and Office NOT A P.O. BOX
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED ** FINAL NOTICE **	1. Mailing Address - Please Correct, If Not Correct		BURKE C WILLIAMS 3200 RIVA RIDGE WY
	NORTHWEST DIRECTIONAL TECHNO BURKE C WILLIAMS 3200 RIVA RIDGE WY		BOISE ID 33709
	BOISE ID 83709		3. Organized Under the Laws of: ID W 1719

4. Corporations: Enter Names and Addresses of **President, Secretary and Directors**
 Limited Liability Companies: Enter Names and Addresses of ☒ **Managers** or ☐ **Members** (check one)

Office held	Name	Street or P.O. Address	City	State	Zip
Manager/ owner	Burke C. Williams	17525 Fairview Ave	Boise	Id	83723

5. SIGNATURE OF CURRENT RA <i>Burke C. Williams</i>	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>Burke C. Williams</i></u> Date <u><i>10/14/96</i></u> Name (Typed or Printed) <u><i>Burke C. Williams</i></u> Title <u><i>Owner</i></u>
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ISSUED: 10-05-1996

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