




No. C101319	Annual Report Form <i>Due No Later Than November 30,</i> 1999		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 * FIRST NOTICE *	1. Mailing Address - Please Correct, If Not Correct BRUNS ENTERPRISES, INC. CRAIG J. BRUNS 100 NEW 6TH ST LEWISTON ID 83501		CRAIG J. BRUNS 106 NEW 6TH ST LEWISTON ID 83501																			
	3. Organized Under the Laws of: ID C101319																					
4. Corporations: Enter Names and Business 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)																						
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Office held</th> <th style="width: 20%;">Name</th> <th style="width: 30%;">Street or P.O. Address</th> <th style="width: 15%;">City</th> <th style="width: 10%;">State</th> <th style="width: 10%;">Zip</th> </tr> </thead> <tbody> <tr> <td>PRES/SECY</td> <td>CRAIG BRUNS</td> <td>1122 LINDEN DR</td> <td>LEWISTON</td> <td>ID</td> <td>83501</td> </tr> <tr> <td>TREASURER</td> <td>NANCY BRUNS</td> <td>"</td> <td>"</td> <td>"</td> <td>"</td> </tr> </tbody> </table> <p>BOTH DIRECTORS ALSO</p>					Office held	Name	Street or P.O. Address	City	State	Zip	PRES/SECY	CRAIG BRUNS	1122 LINDEN DR	LEWISTON	ID	83501	TREASURER	NANCY BRUNS	"	"	"	"
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PRES/SECY	CRAIG BRUNS	1122 LINDEN DR	LEWISTON	ID	83501																	
TREASURER	NANCY BRUNS	"	"	"	"																	
5. Signature of New Registered Agent		6. <table style="width: 100%;"> <tr> <td style="width: 50%;"> Signature  </td> <td style="width: 50%;"> Date 7-19-99 </td> </tr> <tr> <td> Name (Typed/Printed) CRAIG BRUNS </td> <td> Title PRES </td> </tr> </table>			Signature 	Date 7-19-99	Name (Typed/Printed) CRAIG BRUNS	Title PRES														
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ISSUED: 07-03-1999

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