

No. C101530

Annual Report Form

Due No Later Than November 30,

1996

2. Registered Agent

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

LEISURE TIME OF BOISE, INC.
TRISHA WRIGHT
785 8TH ST

IDAHO FALLS ID 83401

TRISHA WRIGHT
785 8TH ST

IDAHO FALLS ID 83401

3. Organized Under the Laws of:

ID C101530

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
President	Trisha Wright	1426 Mojave	Idaho Falls	ID	83401
Secretary	Trisha Wright	1426 Mojave	Idaho Falls	ID	83401

5. NATURE OF BUSINESS

RETAIL SALES

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 Trisha Wright Date 8-14-96Name (Typed or Printed) Trisha Wright Title Pres

ISSUED: 07-06-1996

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