## INSTRUCTIONS ON REVERSE SIDE

No. 36354	Idaho Corporati	Idaho Corporation Annual Report Form		2. Registered Agent and Office NOT A P.O. BOX		
Return To Secretary of State Room 203, Statehouse Boise, ID 83720	Due No Later Than November 1, <sup>1991</sup> 1. Mailing Address — Please Correct, If Not Correct		CAPL SHAVER 705 SOUTH MIH STREET			
						ARTS AND COMMERCE BUILDING, INC CARL H. SHAVER P. O. BOX 7278
	** FINAL NOTICE **	3. Incorporated Under The Laws of				
NO FEE REQUIRED	601\$E	ID 83707 0000	MO: 036354	36	354	
4. Names and Addresses of Office	ers and Directors					
	<u>Name</u>	Street or P.O. Address	<u>City</u>	State	<u>Zip</u>	
President:	C.H. SHAVER	P.O. BOX 1278	B015E	12	83707	
Secretary: Directors:	A. GRAHAM	P.O. BOX 1218	BOISE	120	83707	
Directors.	J. PARKINSON	P.O. BOX 1218	3015E	120	83707	
ч						
5. Nature of Business	6. I certify that true, correct	this Annual Report has been exam and complete.		best of my k	nowledge	
REAL ESTATE REA	Signature Signature	bel & Spawn	<b>2</b> Date / C	7-11 91	•	
JETTA EUTIFIE RET	OTALS Name (Figured or Princed)		Title PA	PESIDE	NT	