

No. 27984	Idaho Corporation Annual Report Form		2. Registered Agent and Office																									
<i>Return To</i> Secretary of State Room 203, Statehouse Boise, ID 83720 NO FEE REQUIRED	<i>Due No Later Than November 1, 1990</i>		CHARLENE HUMPHERYS 480 EAST SECOND NORTH MOUNTAIN HOME ID 83647 153																									
	1. Mailing Address — Please Correct																											
	HUMPHERYS FUNERAL HOME, INC SECRETARY P.O. BOX 388 MOUNTAIN HOME ID 83647		3. Incorporated Under The Laws of ID NO: 027984																									
4. Names and Addresses of Officers and Directors <table border="1"><thead><tr><th></th><th><u>Name</u></th><th><u>Street or P.O. Address</u></th><th><u>City</u></th><th><u>State</u></th><th><u>Zip</u></th></tr></thead><tbody><tr><td>President:</td><td>Charlene Humpherys</td><td>P.O. Box 388</td><td>Mountain Home, Id</td><td></td><td>83647</td></tr><tr><td>Secretary:</td><td>Clarice Miner</td><td>6418 Ustick Rd</td><td>Boise, Id</td><td></td><td>83704</td></tr><tr><td>Directors:</td><td colspan="5">Same</td></tr></tbody></table>						<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President:	Charlene Humpherys	P.O. Box 388	Mountain Home, Id		83647	Secretary:	Clarice Miner	6418 Ustick Rd	Boise, Id		83704	Directors:	Same				
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Directors:	Same																											
5. Nature of Business Funeral Home		6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. <table border="1"><tr><td>Signature</td><td><i>Clarice Miner</i></td><td>Date</td><td>10-10-90</td></tr><tr><td>Name (Typed or Printed)</td><td>Clarice Miner</td><td>Title</td><td>Sec</td></tr></table>			Signature	<i>Clarice Miner</i>	Date	10-10-90	Name (Typed or Printed)	Clarice Miner	Title	Sec																
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