

| NO. C 76156 | Annual Report Form Due No Later Than November 30, 1996 | | 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 | 1. Mailing Address - Please Correct, If Not Correct HENNESSEY INC. GARY L HEBENER E 1677 MILES AVE HAYDEN LAKE ID 83835 | | GARY L. HEBENER WEST 1000 HUBBARD AVE, S COEUR D'ALEN ID 83814 3. Organized Under the Laws of: ID C 76156 | | | | | | | | | | | | | | | | | | | |
| 4. * FIRST NOTICE * Corporations: Enter Names and 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"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Gary L. Hebener</td> <td>E1677 Miles</td> <td>Hayden</td> <td>ID</td> <td>83835</td> </tr> <tr> <td>Treasurer</td> <td>Colleen Coles</td> <td>W. 6930 Highlands</td> <td>COE</td> <td>ID</td> <td>83814</td> </tr> </tbody> </table> | | | | | Office held | Name | Street or P.O. Address | City | State | Zip | President | Gary L. Hebener | E1677 Miles | Hayden | ID | 83835 | Treasurer | Colleen Coles | W. 6930 Highlands | COE | ID | 83814 |
| Office held | Name | Street or P.O. Address | City | State | Zip | | | | | | | | | | | | | | | | | |
| President | Gary L. Hebener | E1677 Miles | Hayden | ID | 83835 | | | | | | | | | | | | | | | | | |
| Treasurer | Colleen Coles | W. 6930 Highlands | COE | ID | 83814 | | | | | | | | | | | | | | | | | |
| 5. NATURE OF BUSINESS MERGERS/ACQUISITIONS | 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>Gary L. Hebener</i></u> Date _____ Name (Typed or Printed) _____ Title _____ | | | | | | | | | | | | | | | | | | | | | |

ISSUED: 07-06-1996

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