

No.	<b>Idaho Corporation Annual Report Form</b> 1992 <i>Due No Later Than November 1,</i>	2. Registered Agent and Office NOT A P.O. BOX
Return To  <b>Secretary of State Room 203, Statehouse Boise, ID 83720</b>  <b>* FIRST NOTICE *</b> <b>NO FEE REQUIRED</b>	<b>1. Mailing Address — Please Correct, If Not Correct</b>	<b>CHARLES L. MCKEE</b> <b>1115 MAIN STREET</b>  <b>LEWISTON ID 83501</b>
	<b>MCKEE'S INCORPORATED</b> <b>CHARLES L. MCKEE</b> <b>1115 MAIN STREET</b>  <b>LEWISTON ID 83501</b>	3. Incorporated Under The Laws of <b>NO: 89781</b>

4. Names and Addresses of Officers and Directors				
	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u> <u>Zip</u>
President:	CHARLES MCKEE	1767 LAMBERT DR.	CLARKSTON	WA. 99403
Secretary:	KIM SCHMALBECK	5229 A LAKE ALICE RD.	FALL CITY	WA. 98029
Directors:				
VICE PRESIDENT	JUDY MCKEE	1767 LAMBERT DR.	CLARKSTON	WA. 99403

5. Nature of Business <b>ORTHOTIC &amp; PROSTHETIC SERVICES</b>	6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. <div style="display: flex; justify-content: space-between;"> <div data-bbox="555 905 1065 965">           Signature <u>Charles L. McKee</u>            Name <u>CHARLES L. MCKEE</u> </div> <div data-bbox="1224 905 1488 965">           Date <u>7/15/92</u>            Title <u>PRESIDENT</u> </div> </div>
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