

INSTRUCTIONS ON REVERSE SIDE

No. 63074	Idaho Corporation Annual Report Form Due No Later Than November 1, 1991		2. Registered Agent and Office NOT A P.O. BOX ROBERT AHERN HC 76, BOX 3109 - MP 84 LOWMAN ID 83637		
Return To Secretary of State Room 203, Statehouse Boise, ID 83720	1. Mailing Address Please Correct If Not Correct BOB'S FIRESIDE INN, INC. ROBERT AHERN BOX 3109 LOWMAN ID 83637		3. Incorporated Under The Laws of ID NO: 063674		
NO FEE REQUIRED					
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:	ROBERT L. AHERN	BOX 3109 HC 77	LOWMAN	IDA	83637
Secretary:	NANCY K. AHERN	" "	"	"	"
Directors:	RICHARD WOLFE	" "	"	"	"
5. Nature of Business REST & MOTEL		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>Robert L. Ahern</u> Name (Typed or Printed) <u>ROBERT L. AHERN</u> Date <u>7-11-91</u> Title <u>PRES</u>			