

25940

No. Return To Secretary of State Room 203, Statehouse Boise, ID 83720 * FIRST NOTICE * NO FEE REQUIRED	Idaho Corporation Annual Report Form Due No Later Than November 1, 1992 1. Mailing Address - Please Correct, If Not Correct MERIDIAN POST NO. 4000, VETERAN MONTY L. SHOBE 1401 WEEPING WILLOW BOISE ID 83709 0000	2. Registered Agent and Office NOT A P.O. BOX MONTY L. SHOBE 1401 WEEPING WILLOW BOISE ID 83709 3. Incorporated Under The Laws of ID NO: 25940																																																
4. Names and Addresses of Officers and Directors <table border="1"> <thead> <tr> <th></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>CLYDE E. BEACHAM</td> <td>3910 GOWAN RD.</td> <td>BOISE</td> <td>ID.</td> <td>83709</td> </tr> <tr> <td>Secretary:</td> <td>MONTY L. SHOBE</td> <td>1401 WEEPING WILLOW</td> <td>BOISE</td> <td>ID.</td> <td>83709</td> </tr> <tr> <td>Directors:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>SR. VICE</td> <td>GRANT ADAMS</td> <td>700 FAIRVIEW SP. 146</td> <td>MERIDIAN</td> <td>ID.</td> <td>83642</td> </tr> <tr> <td>SR. VICE</td> <td>SOSOPH E. CAMPEAK</td> <td>2166 W. SANDERWOOD DR.</td> <td>MERIDIAN</td> <td>ID.</td> <td>83642</td> </tr> <tr> <td>ADJUTANT</td> <td>EUGENE R. SHANKS</td> <td>10880 MARLINWOOD DR.</td> <td>BOISE</td> <td>ID.</td> <td>83704</td> </tr> <tr> <td>SERVICE OFFICER</td> <td>ROBERT C. TEMPLETON</td> <td>424 W. CHERRY LN. APT. 23</td> <td>MERIDIAN</td> <td>ID.</td> <td>83642</td> </tr> </tbody> </table>				Name	Street or P.O. Address	City	State	Zip	President:	CLYDE E. BEACHAM	3910 GOWAN RD.	BOISE	ID.	83709	Secretary:	MONTY L. SHOBE	1401 WEEPING WILLOW	BOISE	ID.	83709	Directors:						SR. VICE	GRANT ADAMS	700 FAIRVIEW SP. 146	MERIDIAN	ID.	83642	SR. VICE	SOSOPH E. CAMPEAK	2166 W. SANDERWOOD DR.	MERIDIAN	ID.	83642	ADJUTANT	EUGENE R. SHANKS	10880 MARLINWOOD DR.	BOISE	ID.	83704	SERVICE OFFICER	ROBERT C. TEMPLETON	424 W. CHERRY LN. APT. 23	MERIDIAN	ID.	83642
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5. Nature of Business VETERANS SUPPORT	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>Monty Lane Shobe</i></td> <td>Date</td> <td><i>5 Oct 1992</i></td> </tr> <tr> <td>Name (Typed or Printed)</td> <td>MONTY LANE SHOBE</td> <td>Title</td> <td>QUARTERMASTER</td> </tr> </table>		Signature	<i>Monty Lane Shobe</i>	Date	<i>5 Oct 1992</i>	Name (Typed or Printed)	MONTY LANE SHOBE	Title	QUARTERMASTER																																								
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