

INSTRUCTIONS ON REVERSE SIDE

No. 43723	Idaho Corporation Annual Report Form		2. Registered Agent and Office NOT A P.O. BOX																									
Return To	Due No Later Than November 30, 1995		ALLEN HARDMAN																									
Secretary of State 700 W Jefferson P.O. Box 83720 Boise, ID 83720-0080 * FIRST NOTICE * NO FEE REQUIRED	1. Mailing Address - Please Correct If Not Correct		12 N MAIN																									
	CHALLIS TRANSPORTATION COMPANY, ALLEN HARDMAN P. O. BOX 190 CHALLIS ID 83226 0190		CHALLIS ID 83226 3. Incorporated Under The Laws of ID NO: 43723																									
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>Postal Code</th> </tr> </thead> <tbody> <tr> <td>President:</td> <td>ALLEN HARDMAN</td> <td>P.O. Box 190</td> <td>Challis</td> <td>ID</td> <td>83226</td> </tr> <tr> <td>Secretary:</td> <td>ROSEMARY J. HARDMAN</td> <td>" " "</td> <td>"</td> <td>"</td> <td>"</td> </tr> <tr> <td>Directors:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>						Name	Street or P.O. Address	City	State	Postal Code	President:	ALLEN HARDMAN	P.O. Box 190	Challis	ID	83226	Secretary:	ROSEMARY J. HARDMAN	" " "	"	"	"	Directors:					
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Secretary:	ROSEMARY J. HARDMAN	" " "	"	"	"																							
Directors:																												
5. Nature of Business	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>Allen Hardman</i></td> <td>Date</td> <td>8-17-95</td> </tr> <tr> <td>Name (Typed or Printed)</td> <td>ALLEN HARDMAN</td> <td>Title</td> <td>Pres.</td> </tr> </table>				Signature	<i>Allen Hardman</i>	Date	8-17-95	Name (Typed or Printed)	ALLEN HARDMAN	Title	Pres.																
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