| | tion Annual Report Form | Tar Definition About St | NOTAPO RO |
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| Return To Due No Later | | 2. Registered Agent and Office NOT A P.O. BO WALTER M. KNAPP | |
| CAVANAUGH BA Walter M. KN | BAY MARINA, INC. | CUOLIN ID 83821 | |
| COOLIN | TD 83821 | of ID NO: 40118 | rne Laws |
| icers and Directors | MUST BE PRINTED C | A TYRED | |
| Name | Street or P.O. Address | <u>City</u> | State Zip |
| er M. Knapp n Coovert | Cavanaugh Bay #5 375 Farm Distric | 2 Coolin t Rd. Fernley | Td-b- Coose |
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| 6. I certify that | this Annual Report has been exam | ined by me and is to the | hest of my knowledge |
| Signature | ac 4 Film | | - /2 ~ 92 |
| | CAVANAUGH BA WALTER M. KN CAVANAUGH BA COOLIN icers and Directors Name ter M. Knapp in Coovert 8. I certify that true, correct Signature | CAVANAUGH BAY MARINA, INC. WALTER M. KNAPP CAVANAUGH BAY #52 COOLIN ID 83821 icers and Directors Name Street or P.O. Address Cer M. Knapp Cavanaugh Bay #5 375 Farm Distric 6. I certify that this Annual Report has been exam true, correct and complete. Signature | CAVANAUGH BAY MARINA, INC. WALTER M. KNAPP CAVANAUGH BAY #52 COOLIN ID 83821 NO: 40118 ID 83821 ID 83821 NO: 40118 ID 83821 ID 83821 NO: 40118 ID 83821 ID |