

No. C101953	<b>Annual Report Form 1996</b> Due No Later Than November 30,		2. Registered Agent and Office <b>NOT A P.O. BOX</b>																			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FEE REQUIRED</b>  <b>* FIRST NOTICE *</b>	1. Mailing Address - Please Correct, If Not Correct		LEE B DILLION 242 N 8TH ST STE 200  BOISE ID 83702																			
	JAKE'S OF TWIN FALLS, INC. LEE B DILLION 242 N 8TH ST STE 200  BOISE ID 83702																					
4. Corporations: Enter Names and Addresses of <b>President, Secretary and Directors</b> Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> <b>Managers</b> or <input type="checkbox"/> <b>Members</b> (check one) <table border="1" data-bbox="18 362 1466 490"> <thead> <tr> <th>Office held</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>MAXINE D JONES</td> <td>1025 E. CEDAR, Apt B</td> <td>POCATELLO</td> <td>ID</td> <td>83201</td> </tr> <tr> <td>SECTY/TREAS</td> <td>SHAWN R. PIERCE</td> <td>1325 PRESTO # 2</td> <td>IDAHU FALLS</td> <td>ID</td> <td>83402</td> </tr> </tbody> </table>					Office held	Name	Street or P.O. Address	City	State	Zip	PRESIDENT	MAXINE D JONES	1025 E. CEDAR, Apt B	POCATELLO	ID	83201	SECTY/TREAS	SHAWN R. PIERCE	1325 PRESTO # 2	IDAHU FALLS	ID	83402
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5. NATURE OF BUSINESS  RESTAURANT	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>[Signature]</u> Date <u>10/8/96</u> Name (Typed or Printed) <u>SHAWN R. PIERCE</u> Title <u>SECTY/TREAS</u>																					

ISSUED: 07-06-1996

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