INSTRUCTIONS ON REVERSE SIDE				ISSUED JULY 1, 1989		
No.		Idaho Corporation Annual Report Form		2. Registered Agent and Office JULIE B. SIMMONS		
Return To Secretary of State Room 203, Statehouse Boise ID 83720 RECEIVED		Due No Later Than November 1,1989		SOUTH SIDE OF HIGHWAY 47		
		1. Mailing Address — A LEWIES, INC. JULIE B. SIMM	IONS	WARM RIVER		10 8342
		P. O. BOX 593		3. Incorporated Under The Laws		
SEC. PEE A	REQUIRED	ASHTON	ID 83420	of ISANO	NO:	81106
4. Names and Add	resses of Office	ers and Directors				*
		<u>Name</u>	Street or P.O. Address	City	State	<u>Zip</u>
President: Secretary: Directors:	Karl H. Lewies Julie B. Simmons Lonnie L. Allen Linda E. Lewies-Garner Lillian L. Lewies		Box 323 Box 594 Box 866 44 W. 4th N. Box 593	Ashton Ashton Ashton St. Anthony Ashton	ID ID ID ID	83420 83420 83420 83445 83420
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5. Nature of Busine	ess		hat this Annual Report has been exa	amined by me and is to the b	est of my k	nowledge
Recreation	on	Signature Name (Typed Printed)	Lelie B. Semm		9/18/89	
		Name Printed)	Julie B. Simmons	s Title Sec	су	