

No. C 104094

Annual Report Form

Due No Later Than November 30,

2. Registered Agent and Office **NOT A P.O. BOX**

Return to:

SECRETARY OF STATE
700 WEST JEFFERSON
PO BOX 83720
BOISE, ID 83720-0080

NO FEE REQUIRED

1. Mailing Address - Please Correct, If Not Correct

THOMAS F PROHASKA ESQUIRE
THOMAS F PROHASKA
PO BOX 2226
COEUR D'ALENE ID 83814

THOMAS F PROHASKA
1621 N 3RD ST
COEUR D'ALENE ID 83814

3. Organized Under the Laws of:

IDAHO

4. Corporations: Enter Names and Addresses of **President, Secretary and Directors**
Limited Liability Companies: Enter Names and Addresses of ☐ **Managers** or ☐ **Members** (check one)

Office held

Name

Street or P.O. Address

City

State

Zip

**President/
Director**

**THOMAS
PROHASKA**

P. O. Box 2226

COEUR D'ALENE ID 83814

Sec./Treas.

**DANIEL
PROHASKA**

P.O. BOX 2226

COEUR D'ALENE, ID 83814

5. **NATURES OF BUSINESS IS**
LAW FIRM

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

Date

9/18/97

Name (Typed or Printed)

THOMAS PROHASKA

Title

President