

No. C 35403	Annual Report Form 1995 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		J.D. EVERTON 726 SECOND AVENUE SOUTH TWIN FALLS ID 83301																									
	EVERTON MATTRESS FACTORY, INC J. D. EVERTON P. O. BOX 345 TWIN FALLS ID 83301		3. Organized Under the Laws of: ID C 35408																									
4. Corporations: Enter Names and Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one) <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:15%;">Office held</th> <th style="width:25%;">Name</th> <th style="width:30%;">Street or P.O. Address</th> <th style="width:15%;">City</th> <th style="width:10%;">State</th> <th style="width:5%;">Zip</th> </tr> </thead> <tbody> <tr> <td>VICE PRES</td> <td>LARRY EVERTON</td> <td>P.O. BOX 345</td> <td>TWIN FALLS</td> <td>ID</td> <td>83301</td> </tr> <tr> <td>SEC/TRES</td> <td>STEVE EVERTON</td> <td>P.O. BOX 345</td> <td>TWIN FALLS</td> <td>ID</td> <td>83301</td> </tr> <tr> <td>PRES</td> <td>DON EVERTON</td> <td>P.O. BOX 345</td> <td>TWIN FALLS</td> <td>ID</td> <td>83301</td> </tr> </tbody> </table>					Office held	Name	Street or P.O. Address	City	State	Zip	VICE PRES	LARRY EVERTON	P.O. BOX 345	TWIN FALLS	ID	83301	SEC/TRES	STEVE EVERTON	P.O. BOX 345	TWIN FALLS	ID	83301	PRES	DON EVERTON	P.O. BOX 345	TWIN FALLS	ID	83301
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5. NATURE OF BUSINESS MANUFACTURE MATTRESS ANY LAWFUL		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>James S Briggs</u> Date <u>7-26-96</u> Name (Typed or Printed) <u>JAMES BRIGGS</u> Title <u>OFF MGR</u>																										

ISSUED: 07-06-1995

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