

59526

Annual Report Form
Due No Later Than November 30,

1993

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

* FIRST NOTICE *

1. Mailing Address - Please Correct, If Not Correct

CONSUMER CREDIT COUNSELING S

XXXXXX-XXXXXX

1337 G Street

LEWISTON

ID 83501

SHERYL CHOATE

XXXXXX-XXXXXX

1337 G Street

LEWISTON

ID 83501

3. Organized Under the Laws of:

ID

C 69526

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors

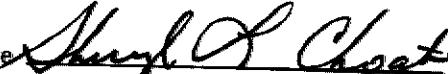
Limited Liability Companies: Enter Names and Addresses of Managers or Members (check one)

Office held	Name	Street or P.O. Address	City	State	Zip
Board Chair	Patty Weeks, Atty	Rt 2, Box 31	Reubens	ID	83548
Vice Chair	Steven Gaines	Box 1014	Lewiston	ID	83501
Secretary	Steve Alder	2203 16th Ave	Lewiston	ID	83501
Treasurer	Melba Brewer	P.O. Box 24	Lewiston	ID	83501
Member	Barbara Anderson	803 Main St	Lewiston	ID	83501
Member	Ken Anderson, Atty	504 Main, S330	Lewiston	ID	83501
Member	Ken Biery	P.O. Box 777	Lewiston	ID	83501
Member	Bob Bingman	1507 G Street	Lewiston	ID	83501
Member	Susan Kleeburg	9th & Main	Lewiston	ID	83501

5. Signature of New Registered Agent

6.

Signature

 Date 8/17/98Name (Typed or
Printed)

Sheryl L. Choate

Title Executive Direc

ISSUED: 07-03-1998

11304

DO NOT TAPE OR STAPLE