

No. C102736	<b>Annual Report Form</b> Due No Later Than November 30, 1996		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  <b>NO FEE REQUIRED</b>  <b>* FIRST NOTICE *</b>	1 Mailing Address - Please Correct, If Not Correct  LEON PARSON STUDIO, INC. LEON PARSON 427 SOUTH 2000 WEST  REXBURG ID 83440		LEON PARSON 427 SOUTH 2000 WEST  REXBURG ID 83440  3 Organized Under the Laws of  ID C102736																			
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"> <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>Pres.</td> <td>Kathryn M. Parson</td> <td>427 South 2000 West</td> <td>Rexburg</td> <td>ID</td> <td>83440</td> </tr> <tr> <td>V.P.</td> <td>Leon Parson</td> <td>" "</td> <td>" "</td> <td>" "</td> <td>" "</td> </tr> </tbody> </table>					Office held	Name	Street or P.O. Address	City	State	Zip	Pres.	Kathryn M. Parson	427 South 2000 West	Rexburg	ID	83440	V.P.	Leon Parson	" "	" "	" "	" "
Office held	Name	Street or P.O. Address	City	State	Zip																	
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V.P.	Leon Parson	" "	" "	" "	" "																	
5. NATURE OF BUSINESS  ART PRINTS MARKETING	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>Kathryn M. Parson</u> Date <u>14 Aug 1996</u> Name (Typed or Printed) <u>Kathryn M. Parson</u> Title <u>Prec</u>																					

ISSUED: 07-06-1996

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