

Annual Report Form

Due No Later Than November 30,

1998

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

LEIBER'S WORMS, INC.

~~JEFF ALAN LEEN~~

1509 YELLOWSTONE

POCATELLO

ID 83201

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

~~JEFF ALAN LEEN~~
1509 YELLOWSTONE

POCATELLO ID 83201

3. Organized Under the Laws of:

OR

C123766

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

Rodney A LEIBER President

1220 Young St

Woodburn

OR

97071

Vice President NANCY LEIBER

"

"

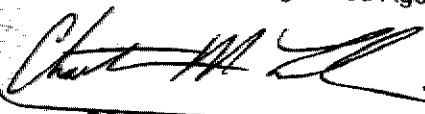
"

"

~~Manager~~

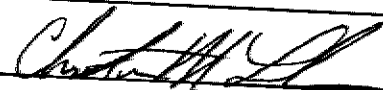
manager CHRISTINA LEIBER 1509 N. Yellowstone Pocatello ID 83201

5. Signature of New Registered Agent



6.

Signature



Date

7/16/98

Name (Typed or Printed)

CHRISTINA M LEIBER

Title

Manager

ISSUED: 07-03-1998

DO NOT TAPE OR STAPLE

5267