No. 013/653		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				J J DRIEVER PT 2 NORTH HAWTHORNE RD POCATELLO ID 83202 3. Organized Under the Laws of:		
		EAST IDAHO HORSEMEN'S ASSOCI J J DRIEVER RT 2 NORTH HAWTHOPNE PD			10			
* FIRST NO	TICE *	POCAT	ELLO	ID 63202		ID	0109	9638
 Corporations: En Limited Liability (ter Names and	Addresses o	of President, Secretar Addresses of Mar	y and Directors				
Office held		i Names and			mbers (chec	k one)		
Resident J.T. Sn		. .	Street or P.O. 2505 /€ 5+		716	<u>City</u> ho Falls,	State	Zip
Director			RHA N. HAW		^	•		83
DiRector	Vicky Jo		358 N. 300 E			tello, ID		13242
	RANdy Co		1552 LARSEN	Rd	Soda	k Foot ID Springs, I	12 A-	3276
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).			6. I certify that this A	nnual Report has	haan ayam	and by an and	: 	
NATURE OF	BUSINESS	,	knowledge true, co	orrect and comple	te. A	med by me and	is to the be	est or my
DOOMOTO			Signature //	A		Date <u>//</u>	-8-96	
PROMUTE	HORSE RA	CING	Name (Typed or Vi	cky Jo El	ISON	Title <u></u>	Rector	
ISSUED:	37-36-19	95					378	
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