

Annual Report Form

1998

Due No Later Than November 30,

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

LOST RIVERS EMTS, INC.

A. BRENT PEARSON
P.O. BOX 503

ARCO

ID 83213

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

A. BRENT PEARSON
201 NORTH IDAHO ST.

ARCO

ID 83213

3. Organized Under the Laws of:

ID

C 79707

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
PRESIDENT	A. BRENT PEARSON	P.O. BOX 17,430 EAST ST.	ARCO	ID	83213
SECRETARY	MARCENE HJELM	BOX 697	ARCO	ID	83213
DIRECTOR	DANIEL KOSTE	244 EAST GRANDE AVE.	ARCO	ID	83213
DIRECTOR	VICTOR GONZALES	P.O. BOX 581, 694	ARCO	ID	83213
DIRECTOR	C. W. MARVEL	WEST GRAND AVE. P.O. BOX 3	ARCO	ID	83213

5. Signature of New Registered Agent

6.

Signature

A. Brent Pearson

Date

7/14/98

Name (Typed or Printed)

A. BRENT PEARSON

Title

UNIT PRESIDENT

ISSUED: 07-03-1998

DO NOT TAPE OR STAPLE

1702