

No. C 101920	Due no later than Apr 30, 2002 Annual Report Form	2. Registered Agent and Office NO PO BOX GARY MEDLEY 6033 N & S HIGHWAY LEWISTON, ID 83501																																				
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable GARY MEDLEY LOGGING, INC. GARY MEDLEY P O BOX 472 OROFINO, ID 83544	3. <u>New</u> Registered Agent Signature																																				
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;"><u>Office held</u></th> <th style="text-align: left;"><u>Name</u></th> <th style="text-align: left;"><u>Street or P.O. Address</u></th> <th style="text-align: left;"><u>City</u></th> <th style="text-align: left;"><u>State</u></th> <th style="text-align: left;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Gary Medley</td> <td>6033 N & S Highway</td> <td>Lewiston</td> <td>ID</td> <td>83501</td> </tr> <tr> <td>Sec/Treas</td> <td>Sandra Medley</td> <td>P.O. Box 541</td> <td>Orofino</td> <td>ID</td> <td>83544</td> </tr> <tr> <td>Director</td> <td>Nikki Anderson</td> <td>661 W. Peachtree Dr.</td> <td>Hayden</td> <td>ID</td> <td></td> </tr> <tr> <td>Director</td> <td>Hope Medley</td> <td>P.O. Box 541</td> <td>Orofino</td> <td>ID</td> <td>83544</td> </tr> <tr> <td>Director</td> <td>Corey Medley</td> <td>6029 N & S Highway</td> <td>Lewiston</td> <td>ID</td> <td>83501</td> </tr> </tbody> </table>			<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President	Gary Medley	6033 N & S Highway	Lewiston	ID	83501	Sec/Treas	Sandra Medley	P.O. Box 541	Orofino	ID	83544	Director	Nikki Anderson	661 W. Peachtree Dr.	Hayden	ID		Director	Hope Medley	P.O. Box 541	Orofino	ID	83544	Director	Corey Medley	6029 N & S Highway	Lewiston	ID	83501
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