

September 19, 1996

HOLLY MERRITT  
J & H FOREST PRODUCTS, INC C 83088  
PO BOX 190  
ATHOL ID 83801

RE: J & H FOREST PRODUCTS, INC C 83088


Greetings:

Please find enclosed your recently submitted annual report for the 1996-1997 fiscal year. We are unable to accept it in its present form. Please make the following correction(s) and return to this office.

The annual report must be signed by an authorized individual designated by the Board of the corporation.

If you have any questions or need further assistance, please do not hesitate to contact this office at (208) 332-2811.

Very truly yours,



Sheryl DeVries  
Corporate Division

Enclosures: cited

No. <b>C 83083</b>	<b>Annual Report Form</b> Due No Later Than November 30, <b>1996</b>		2. Registered Agent and Office <b>NOT A P.O. BOX</b>																			
Return to: <b>SECRETARY OF STATE</b> <b>700 WEST JEFFERSON</b> <b>PO BOX 83720</b> <b>BOISE, ID 83720-0080</b>  <b>NO FEE REQUIRED</b>	1. Mailing Address - Please Correct, If Not Correct  <b>J &amp; H FOREST PRODUCTS, INC.</b> <b>HOLLY MERRITT</b> <b>PO BOX 190</b>		<b>HOLLY MERRITT</b> <b>5400 E HWY 54</b>  <b>ATHOL</b> ID <b>83801</b>  3. Organized Under the Laws of:  ID <b>C 83088</b>																			
<b>* FIRST NOTICE *</b> <b>ATHOL</b> ID <b>83801</b>																						
4. Corporations: Enter Names and Addresses of <b>President, Secretary and Directors</b> Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> <b>Managers</b> or <input type="checkbox"/> <b>Members</b> (check one) <table border="1" data-bbox="18 359 1462 682"> <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><b>PRESIDENT</b></td> <td><b>HOLLY D JANKSEN</b></td> <td><b>RT1 BOX 43C</b></td> <td><b>PRIEST RIVER</b></td> <td><b>ID.</b></td> <td><b>83856</b></td> </tr> <tr> <td><b>SECRETARY/ TREASURER</b></td> <td><b>JILL R LINTON</b></td> <td><b>RT1 BOX 19F</b></td> <td><b>PRIEST RIVER</b></td> <td><b>ID.</b></td> <td><b>83856</b></td> </tr> </tbody> </table>					Office held	Name	Street or P.O. Address	City	State	Zip	<b>PRESIDENT</b>	<b>HOLLY D JANKSEN</b>	<b>RT1 BOX 43C</b>	<b>PRIEST RIVER</b>	<b>ID.</b>	<b>83856</b>	<b>SECRETARY/ TREASURER</b>	<b>JILL R LINTON</b>	<b>RT1 BOX 19F</b>	<b>PRIEST RIVER</b>	<b>ID.</b>	<b>83856</b>
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5. <b>NATURE OF BUSINESS</b>  <b>PLANING MILL</b>		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 _____ Date _____ Name (Typed or Printed) _____ Title _____																				

ISSUED: 07-06-1996

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