

No. C110878	Annual Report Form 1999 Due No Later Than November 30,		2. Registered Agent and Office NOT A P.O. BOX STEVEN PETERSON 102 MAIN AVE S TWIN FALLS ID 83301																		
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 GARY N. NELSON & CO. 5422 NORTH 400 EAST HAGERMAN ID 83332		3. Organized Under the Laws of: ID C110878																		
	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)																				
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Office held</th> <th style="width: 30%;">Name</th> <th style="width: 30%;">Street or P.O. Address</th> <th style="width: 15%;">City</th> <th style="width: 10%;">State</th> <th style="width: 10%;">Zip</th> </tr> </thead> <tbody> <tr> <td>Pres</td> <td>Gary N Nelson</td> <td>Same</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Sec</td> <td>Nancy I Nelson</td> <td>Same</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Office held	Name	Street or P.O. Address	City	State	Zip	Pres	Gary N Nelson	Same				Sec	Nancy I Nelson	Same			
Office held	Name	Street or P.O. Address	City	State	Zip																
Pres	Gary N Nelson	Same																			
Sec	Nancy I Nelson	Same																			
5. Signature of New Registered Agent		6. Signature <u><i>Gary Nelson</i></u> Date <u>8-4-99</u> Name (Typed or Printed) _____ Title <u>pres</u>																			

ISSUED: 07-03-1999

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