

No. <b>C 96733</b>	<b>Annual Report Form</b> 1996 <i>Due No Later Than November 30,</i>		2. Registered Agent and Office <b>NOT A P.O. BOX</b>																															
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FEE REQUIRED</b>  <b>* FIRST NOTICE *</b>	1. Mailing Address - Please Correct, If Not Correct  LESLIE ENTERPRISES, INC. MICHAEL J LESLIE PO BOX 225  SPOKANE                      WA 99204		CHARLES M LESLIE E 3275 DRIFTWOOD DR  COEUR D'ALEN ID 83814																															
	3. Organized Under the Laws of:  WA                      C 96733																																	
	4. Corporations: Enter Names and Addresses of <b>President, Secretary and Directors</b> Limited Liability Companies: Enter Names and Addresses of <input checked="" type="checkbox"/> <b>Managers</b> or <input type="checkbox"/> <b>Members</b> (check one)																																	
<table border="1" 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>Michael J Leslie</td> <td>12731 Deercrest</td> <td>Spokane,</td> <td>WA</td> <td>99204</td> </tr> <tr> <td>Treasurer</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Vice Pres/</td> <td>David E Barber</td> <td>3417 E 62nd</td> <td>Spokane,</td> <td>WA</td> <td>99223</td> </tr> <tr> <td>Secretary</td> <td></td> <td></td> <td></td> <td></td> <td></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/	Michael J Leslie	12731 Deercrest	Spokane,	WA	99204	Treasurer						Vice Pres/	David E Barber	3417 E 62nd	Spokane,	WA	99223	Secretary					
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5. NATURE OF BUSINESS  DISTRIBUTION OF MANUFACTURERS MATERIALS		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 <u><i>Michael J Leslie</i></u> Date <u>8/1/96</u> Name <small>(Typed or Printed)</small> <u>Michael J. Leslie</u> Title <u>President</u>																																

ISSUED: 07-06-1996

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