

No. C 50651	Annual Report Form 1997 <i>Due No Later Than November 30.</i>		2. Registered Agent and Office NOT A P.O. BOX LAYNE RASMUSSEN 29 SOUTH 500 WEST BURLEY ID 83318																									
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 RASMUSSEN, INC. LAYNE RASMUSSEN P. O. BOX 39 BURLEY ID 83318		3. Organized Under the Laws of: ID C 50651																									
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 style="width: 100%; border: none;"> <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>LAYNE RASMUSSEN</td> <td>29 SOUTH 500 WEST</td> <td>BURLEY,</td> <td>ID</td> <td>83318</td> </tr> <tr> <td>V. PRESIDENT</td> <td>MAXINE RASMUSSEN</td> <td>402 EAST 17TH STREET</td> <td>RUPERT,</td> <td>ID</td> <td>83350</td> </tr> <tr> <td>SECRETARY</td> <td>GAYLE RASMUSSEN</td> <td>29 SOUTH 500 WEST</td> <td>BURLEY,</td> <td>ID</td> <td>83318</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	LAYNE RASMUSSEN	29 SOUTH 500 WEST	BURLEY,	ID	83318	V. PRESIDENT	MAXINE RASMUSSEN	402 EAST 17TH STREET	RUPERT,	ID	83350	SECRETARY	GAYLE RASMUSSEN	29 SOUTH 500 WEST	BURLEY,	ID	83318
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5.	6.  Signature _____ Date 11/21/97 Name (Typed or Printed) LAYNE RASMUSSEN Title PRESIDENT																											

ISSUED: 07-04-1997

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↓ DO NOT TAPE OR STAPLE ↓