


No. C 28525	Annual Report Form <i>Due No Later Than November 30,</i> 1999		2. Registered Agent and Office NOT A P.O. BOX PAUL AHLSTROM 465 10TH STREET IDAHO FALLS ID 83404																		
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) IDAHO FALLS OFF-STREET PARKI PAUL W. AHLSTROM, JR. BOX 599 50699 <div style="text-align: right;">83405</div> IDAHO FALLS ID 83402		3. Organized Under the Laws of: <div style="text-align: center;">ID C 28525</div>																		
	4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one)																				
<table border="0" style="width: 100%;"> <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>Paul Ahlstrom</td> <td>Box 50699</td> <td>Idaho Falls</td> <td>ID</td> <td>83405</td> </tr> <tr> <td colspan="6">Secretary - open position</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	Paul Ahlstrom	Box 50699	Idaho Falls	ID	83405	Secretary - open position					
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>																
President	Paul Ahlstrom	Box 50699	Idaho Falls	ID	83405																
Secretary - open position																					
5. Signature of New Registered Agent		6. <div style="margin-top: 20px;"> Signature <u></u> Date <u>11-30-99</u> Name (Typed or Printed) _____ Title _____ </div>																			

ISSUED: 07-03-1999

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