

## INSTRUCTIONS ON REVERSE SIDE

|                                                                                 |                                                                                                                     |                                                                                                  |
|---------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|
| No. 48301                                                                       | Idaho Corporation Annual Report Form                                                                                | 2. Registered Agent and Office NOT A P.O. BOX<br>CHARLES HOWARD PERSONS<br>415 12TH AVENUE SOUTH |
| Return To                                                                       | Due No Later Than November 30, 1995                                                                                 |                                                                                                  |
| Secretary of State<br>700 W Jefferson<br>P.O. Box 83720<br>Boise, ID 83720-0080 | 1. Mailing Address -- Please Correct if Not Correct<br>PERSONS FLAHIFF FUNERAL CHAPEL<br>HOWARD PERSONS<br>BOX 1009 | NAMP A ID 83651                                                                                  |
| * FIRST NOTICE *                                                                | NAMP A ID 83653                                                                                                     | 3. Incorporated Under The Laws of<br>ID                                                          |
| NO FEE REQUIRED                                                                 |                                                                                                                     | NO: 48301                                                                                        |

## 4. Names and Addresses of Officers and Directors

| Name                              | Street or P.O. Address | City   | State | Postal Code |
|-----------------------------------|------------------------|--------|-------|-------------|
| President: CHARLES HOWARD PERSONS | P.O. BOX 1009          | NAMP A | ID    | 83653-1009  |
| Secretary: DELLA NORINE PERSONS   | "                      | "      | "     | "           |
| Directors:                        |                        |        |       |             |

## 5. Nature of Business

FUNERAL HOME

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

Name

(Typed or  
Printed)

NORINE PERSONS

Date

JULY 25, 1995

Title

CORP.-SECRETARY