

November 24, 1997

KE NEUPERT
CONCOLIDATED SUPPLY CO C 22455
PO BOX 5788
PORTLAND OR 97228

RE: CONCOLIDATED SUPPLY CO C 22455

Greetings:

Please find enclosed your recently submitted annual report for the 1996-1997 fiscal year. We are unable to accept it in its present form. Please make the following correction(s) and return to this office.

Pursuant to section 30-1-120(6) the annual report must be signed by an officer of the corporation or the chairman of the board of directors.

The corrected annual report must be received in this office before December 1, 1997 to avoid being subject to administrative dissolution. If you wish to let the corporation administratively dissolve, disregard any future notices you may receive.

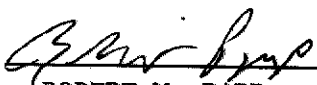
If you have any questions or need further assistance, please do not hesitate to contact this office at (208) 332-2811.

Very truly yours,



Sheryl DeVries
Corporate Division

Enclosures: cited

No. C 22455	Annual Report Form 1997 Due No Later Than November 30,		2. Registered Agent and Office NOT A P.O. BOX BRETT SPACKMAN 10621 W EMERALD BOISE ID 83704																																																						
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 CONSOLIDATED SUPPLY CO. K.E. NEUPERT P.O. BOX 5788 PORTLAND OR 97228		3. Organized Under the Laws of: ID C 22455																																																						
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 style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 20%;">Office held</th> <th style="text-align: left; width: 20%;">Name</th> <th style="text-align: left; width: 30%;">Street or P.O. Address</th> <th style="text-align: left; width: 15%;">City</th> <th style="text-align: left; width: 15%;">State</th> <th style="text-align: left; width: 10%;">Zip</th> </tr> </thead> <tbody> <tr> <td>PRESIDENT.....</td> <td>KARL E. NEUPERT</td> <td>P.O. BOX 5788, PORTLAND,</td> <td>OREGON</td> <td>97228-5788</td> <td></td> </tr> <tr> <td>VICE-PRESIDENT</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>& TREASURER...</td> <td>RONALD E. EMMERSON</td> <td>P.O. BOX 5788, PORTLAND,</td> <td>OREGON</td> <td>97228-5788</td> <td></td> </tr> <tr> <td>SECRETARY.....</td> <td>KAROLYN J. NEUPERT</td> <td>P.O. BOX 5788, PORTLAND,</td> <td>OREGON</td> <td>97228-5788</td> <td></td> </tr> <tr> <td>ASSISTANT</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>SECRETARY.....</td> <td>ELEANOR L. NEUPERT</td> <td>P.O. BOX 5788, PORTLAND,</td> <td>OREGON</td> <td>97228-5788</td> <td></td> </tr> <tr> <td>DIRECTOR.....</td> <td>JEFFERY T. KONEN</td> <td>P.O. BOX 5788, PORTLAND,</td> <td>OREGON</td> <td>97228-5788</td> <td></td> </tr> <tr> <td>DIRECTOR.....</td> <td>THOMAS E. KELLERAN</td> <td>P.O. BOX 5788, PORTLAND,</td> <td>OREGON</td> <td>97228-5788</td> <td></td> </tr> </tbody> </table>				Office held	Name	Street or P.O. Address	City	State	Zip	PRESIDENT.....	KARL E. NEUPERT	P.O. BOX 5788, PORTLAND,	OREGON	97228-5788		VICE-PRESIDENT						& TREASURER...	RONALD E. EMMERSON	P.O. BOX 5788, PORTLAND,	OREGON	97228-5788		SECRETARY.....	KAROLYN J. NEUPERT	P.O. BOX 5788, PORTLAND,	OREGON	97228-5788		ASSISTANT						SECRETARY.....	ELEANOR L. NEUPERT	P.O. BOX 5788, PORTLAND,	OREGON	97228-5788		DIRECTOR.....	JEFFERY T. KONEN	P.O. BOX 5788, PORTLAND,	OREGON	97228-5788		DIRECTOR.....	THOMAS E. KELLERAN	P.O. BOX 5788, PORTLAND,	OREGON	97228-5788	
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5.		6.																																																							
		Signature  Date 11/19/97 Name (Typed or Printed) ROBERT M. PAPP Title ACCOUNTANT																																																							

ISSUED: 07-04-1997

↓ DO NOT TAPE OR STAPLE ↓

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