	INSTRUCTIONS ON REVERSE SIDE ISSUED: 06-30-1990							
	No. 85394	Idaho Co	Idaho Corporation Annual Report Form		2. Registered Agent and Office			
• •	Return To	Due No La	ater Than November 1, 1990	CHERYL- HALV		•		
	Secretary of State	1. Mailing Addres	s — Please Correct	2. Registered Agent and Office CHERYL- HALVERSON 1117 MAIN AVENUE				
. :	Room 203, Statehous Boise, ID 83720	ST. MARI	ES COUNCIL FOR THE	ST. MARIES	IÞ	83861	61 76	
	5036, 15 03720		CHERYL HALVERSON 1117 MAIN AVENUE					
	NO FEE REQUIRE	ST. MARI	ES ID 83861	NO: 085394				
	4. Names and Addresses of C	fficers and Directors						
	Ä	<u>Name</u>	Street or P.O. Address	City	<u>State</u>	<u>Zip</u>		
	President: CHERYL	HALVERSON	P.O. BOX 149	ST. MARIES	IDAHO	83861		
	Secretary: DORIS L	eCOULTRE	ROUTE #2, BOX 14	ST. MARIES	IDAHO	83861		
	Directors: NANCY W	OLFF	HCR 2, BOX 122B	ST. MARIES	IDAHO	83861	1	
	SUE JOS	TROM	ROUTE #2, BOX 103	ST. MARIES	IDAHO	83861		
	SHARON	R. KIRTS	P.O. BOX 425	ST. MARIES	IDAHO	83861		
	BYRON I	BYRON ISRAEL		HARRISON	IDAHO	83833	Ì	
	BILL LIDDELL		HCR 2, BOX 201 130 S. 10th STREET	ST. MARIES	IDAHO	83861	1	

5. Nature of Business	6. I certify that this Annual Report has been examined by me and is to the best of my knowledge		
ART COUNCIL	true, correct and complete. Signature Sharon R. Kurts	Date 9-25-90	
	Name (Typed or SHARON R. KIRTS	TREASURER	

TISH KNOWLAND

ROUTE #2, BOX 128H ST. MARIES

83861

IDAHO