

No. 78447 REINSTATEMENT Secretary of State Room 203, Statehouse Boise, ID 83720 FORFEITED 12/2/86 Reinstatement Fee: \$100	Idaho Corporation Annual Report Form Due No Later Than November 1, 1. Mailing Address — Please Correct YERGENSEN ENTERPRISES, INC. VERL D YERGENSEN PO Box 1990 TWIN FALLS ID 83301	2. Registered Agent and Office VERL D YERGENSEN 508 BLUE LAKES BLVD N TWIN FALLS ID 83301 3. Incorporated Under The Laws of ID NO: 78447																				
4. Names and Addresses of Officers and Directors <table border="1"> <thead> <tr> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>President: VERL YERGENSEN</td> <td>2317 CASTLE DR</td> <td>TWIN FALLS</td> <td>ID</td> <td>83301</td> </tr> <tr> <td>Secretary: CONNIE YERGENSEN</td> <td>2317 CASTLE DR</td> <td>TWIN FALLS</td> <td>ID</td> <td>83301</td> </tr> <tr> <td>Directors:</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>			Name	Street or P.O. Address	City	State	Zip	President: VERL YERGENSEN	2317 CASTLE DR	TWIN FALLS	ID	83301	Secretary: CONNIE YERGENSEN	2317 CASTLE DR	TWIN FALLS	ID	83301	Directors:				
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5. Nature of Business Convenience Store	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 <u><i>Verl Yergensen</i></u> Date <u>12/2/83</u> Name (Typed or Printed) _____ Title _____																					