

No. C 96345	Annual Report Form Due No Later Than November 30,		2. Registered Agent and Office NOT A P.O. BOX																									
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED	3. Mailing Address - Please Check: If Not Correct T & T ENTERPRISES, INC. THOMAS P CAPONE 819 E ST. MARIES AVE COEUR D'ALENE ID 83814		THOMAS P CAPONE 819 E ST MARIES AVE COEUR D'ALENE ID 83814 3. Organized Under the Laws of: ID C 96345																									
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of ☐ Managers or ☐ Members (check one) <table border="1"><thead><tr><th>Office held</th><th>Name</th><th>Street or P.O. Address</th><th>City</th><th>State</th><th>Zip</th></tr></thead><tbody><tr><td>Pres</td><td>Thomas Capone</td><td>819 E. St. Maries Ave</td><td>COA</td><td>ID</td><td>83814</td></tr><tr><td>V-Pres</td><td>Teresa Capone</td><td>"</td><td>"</td><td>"</td><td>"</td></tr><tr><td>Sec</td><td></td><td></td><td></td><td></td><td></td></tr></tbody></table>					Office held	Name	Street or P.O. Address	City	State	Zip	Pres	Thomas Capone	819 E. St. Maries Ave	COA	ID	83814	V-Pres	Teresa Capone	"	"	"	"	Sec					
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Sec																												
5. Signature of New Registered Agent		6. Signature <u>T. J. Capone, VP</u> Date <u>9-8-99</u> Name (Typed or Printed) <u>Teresa Capone</u> Title <u>V.P.</u>																										