			INSTRUCTION	NS ON REVERSE SIDE		<b>₩</b> F F	1	
No. 86399			laho Corporation	Annual Report Form	2. Registered Agent ar	2. Registered Agent and Office NOT A P.O. BOX		
Return To Secretary of State Room 203, Statehouse Boise, ID 83720		7 0	ue No Later Than i	November 1, 1991	C T CORPORATION SYSTEM			
		T. Madi	ng Address — <i>Plea</i>	300 NORTH 61	300 NORTH 6TH STREFT			
		KIN	LEY CORPORA	POISE	ID	83701		
		P.0	. BOX 1190	3. Incorporated Under The Laws of				
NO FEE REG	DUIRED	OLE	AN The control of the	NY 14760	NO: 086399			
. Names and Addre	sses of Office	ers and Din	ectore				• .	
		Na	me e	Street or P.O. Address	City	State	<u>Zip</u>	
Secretary:	Bernilee 1	Moore	4025 Woodlan 1372 Lillib PO Box 1190	d Park Blvd ridge Rd	Arlington Portville Olean	TX NY NY	76013 14770 14760	
a de	• *	of the state of the state of	$(\mathcal{A}_{i},$	entra di Paris di Par				
. Nature of Busines	8		6. I certify that the true, correct a	nis Annual Report has been e	xamined by me and is to the	best of my l	knowledge	
•			Signature					
<u>pipeline operators</u>			Name (Tiped if Be	rnilee Moore	Title Se	THM Secretary		