

No. C 52161	Annual Report Form 1999 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 * FIRST NOTICE *	1 Mailing Address - Please Correct if Not Correct		CARMEL SANDY 7599 MOHAWK BONNERS FERRY ID 83805													
WARD TRUCKING, INC. VERNON SANDY P.O. BOX 916 BONNERS FERRY ID 83805		3. Organized Under the Laws of: ID C 52161														
<p>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)</p> <table border="1"> <thead> <tr> <th data-bbox="103 364 215 392">Office held</th> <th data-bbox="351 364 422 392">Name</th> <th data-bbox="654 364 877 392">Street or P.O. Address</th> <th data-bbox="1101 364 1157 392">City</th> <th data-bbox="1268 364 1332 392">State</th> <th data-bbox="1420 364 1468 392">Zip</th> </tr> </thead> <tbody> <tr> <td data-bbox="95 442 223 599">PRES. SEC. TRES.</td> <td colspan="5" data-bbox="271 425 1516 599" style="text-align: center;"> <p>SAME</p> <p>CARMEL SANDY 7599 MOHAWK BONNERS FERRY ID. 83805</p> </td> </tr> </tbody> </table>					Office held	Name	Street or P.O. Address	City	State	Zip	PRES. SEC. TRES.	<p>SAME</p> <p>CARMEL SANDY 7599 MOHAWK BONNERS FERRY ID. 83805</p>				
Office held	Name	Street or P.O. Address	City	State	Zip											
PRES. SEC. TRES.	<p>SAME</p> <p>CARMEL SANDY 7599 MOHAWK BONNERS FERRY ID. 83805</p>															
5. Signature of New Registered Agent		6. Signature <u>Carmel Sandy</u> Date <u>11/30/99</u> Name <small>(Typed or Printed)</small> _____ Title _____														

ISSUED: 07-03-1999

27172