


No. 574	Annual Report Form 1995 Due No Later Than November 30,		2. Registered Agent and Office NOT A P.O. BOX MARVIN L. ALBRIGHT													
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 M.L. ALBRIGHT & SONS, L.L.C. MARVIN L. ALBRIGHT 3000 3030 LAPWAI RD LEWISTON ID 83501		3000 3030 LEWISTON ID 83501 3. Organized Under the Laws of: ID W 694													
4. Corporations: Enter Names and Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input checked="" type="checkbox"/> Managers or <input type="checkbox"/> 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>Manager</td> <td>Marvin Albright</td> <td>3030 Lapwai Rd</td> <td>Lewiston</td> <td>ID</td> <td>83501</td> </tr> </tbody> </table>					Office held	Name	Street or P.O. Address	City	State	Zip	Manager	Marvin Albright	3030 Lapwai Rd	Lewiston	ID	83501
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Manager	Marvin Albright	3030 Lapwai Rd	Lewiston	ID	83501											
5. SIGNATURE OF CURRENT RA	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></u> Date <u>7-22-96</u> Name (Typed or Printed) <u>marvin Albright</u> Title <u>manager</u>															

ISSUED: 37-08-1995

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