

INSTRUCTIONS ON REVERSE SIDE

No. 97694	Idaho Corporation Annual Report Form		ISSUED: 07-04-1995 2. Registered Agent and Office NOT A P.O. BOX																									
Return To	Due No Later Than November 30, 1995		JAMES R WILSON 1623 ELDREDGE AVE																									
Secretary of State 700 W Jefferson P.O. Box 83720 Boise, ID 83720-0080 * FIRST NOTICE * NO FEE REQUIRED	1. Mailing Address - Please Correct If Not Correct		TWIN FALLS ID 83301																									
	WILSON'S, INC. JAMES R WILSON 1623 ELDREDGE AVE TWIN FALLS ID 83301		3. Incorporated Under The Laws of ID NO: 97694																									
4. Names and Addresses of Officers and Directors <table border="1"> <thead> <tr> <th></th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>President:</td> <td>JAMES R. Wilson</td> <td>1540 Willow Ln</td> <td>Twin Falls</td> <td>ID</td> <td>83301</td> </tr> <tr> <td>Secretary:</td> <td>JEANNE C Wilson</td> <td>1540 Willow Ln.</td> <td>Twin Falls</td> <td>ID</td> <td>83301</td> </tr> <tr> <td>Directors:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>						Name	Street or P.O. Address	City	State	Postal Code	President:	JAMES R. Wilson	1540 Willow Ln	Twin Falls	ID	83301	Secretary:	JEANNE C Wilson	1540 Willow Ln.	Twin Falls	ID	83301	Directors:					
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Directors:																												
5. Nature of Business	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>Jeane C. Wilson</u> Date <u>7-15-95</u> Name (Typed or Printed) <u>JEANNE C Wilson</u> Title <u>Sec.</u>																											