

July 18, 1996

Audrey Lons
Verl Audrey Lons Family, Inc. C115010
280 N. 7th E.
St Anthony ID 83445

RE: Verl Audrey Lons Family, Inc. C115010

Greetings:

Please find enclosed your recently submitted annual report for the 1996-1997 fiscal year. We are unable to accept it in its present form. Please make the following correction(s) and return to this office.

Block 5 on your annual report must be completed to show the nature of business of the corporation. (Any Lawful is not acceptable)

If you have any questions or need further assistance, please do not hesitate to contact this office at (208) 332-2811.

Very truly yours,



Sheryl DeVries
Corporate Division

Enclosures: cited

No. C115010	Annual Report Form 1996 <i>Due No Later Than November 30,</i>		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		AUDREY LONG 280 N 7TH E ST ANTHONY ID 83445																			
	VERL AUDREY LONG FAMILY, INC AUDREY LONG 280 N 7TH E ST ANTHONY ID 83445																					
			3. Organized Under the Laws of: ID C115010																			
4. Corporations: Enter Names and 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) <table border="0"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>PRES</td> <td>AUDREY LONG</td> <td>280 N 7E</td> <td>ST. ANTHONY</td> <td>ID</td> <td>83445</td> </tr> <tr> <td>SECRETARY</td> <td>VERL LONG</td> <td>"</td> <td>"</td> <td>"</td> <td>"</td> </tr> </tbody> </table>					<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	PRES	AUDREY LONG	280 N 7E	ST. ANTHONY	ID	83445	SECRETARY	VERL LONG	"	"	"	"
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>																	
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SECRETARY	VERL LONG	"	"	"	"																	
5. NATURE OF BUSINESS ANY LAWFUL		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>Audrey Long</u> Date <u>7/16/96</u> Name (Typed or Printed) <u>AUDREY LONG</u> Title <u>Pres.</u>																				

ISSUED: 07-06-1996

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