

| No. 183898<br><br>Return To<br><br><b>Secretary of State</b><br><b>Room 203, Statehouse</b><br><b>Boise, ID 83720</b><br>RECEIVED<br>SEC. OF STATE<br><br><b>20 OCT 31 PM 2 50</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | <b>Idaho Corporation Annual Report Form</b><br><br><i>Due No Later Than November 1, 1988</i><br>1. Mailing Address — Please Correct 183898<br><br>GUARDIAN FIRE APPARATUS AND SAFE<br>MARION TOMLINSON<br>RT.1 BOX 122F<br>LAPWAI, IDAHO<br>83540                                                                                                                                                                                   | 2. Registered Agent and Office<br><br><b>DANNY J. RACAKOVICH</b><br><b>422 17TH. STREET</b><br><b>LEWISTON, IDAHO</b><br><b>83501</b><br><br>3. Incorporated Under The Laws of<br><br><b>STATE OF IDAHO</b> |                                                          |                                           |                               |             |              |            |            |                  |               |        |     |       |            |              |                |        |     |       |            |                  |                |        |     |       |
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| ENTERED<br><b>NOV 4 1988</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                             |                                                          |                                           |                               |             |              |            |            |                  |               |        |     |       |            |              |                |        |     |       |            |                  |                |        |     |       |
| 4. Names and Addresses of Officers and Directors<br><br><table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;"></th> <th style="width: 30%; text-align: center;"><u>Name</u></th> <th style="width: 30%; text-align: center;"><u>Street or P.O. Address</u></th> <th style="width: 10%; text-align: center;"><u>City</u></th> <th style="width: 10%; text-align: center;"><u>State</u></th> <th style="width: 10%; text-align: center;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President:</td> <td>Marion Tomlinson</td> <td>Rt.1 Box 122F</td> <td>Lapwai</td> <td>Id.</td> <td>83540</td> </tr> <tr> <td>Secretary:</td> <td>Guy McDowell</td> <td>Rt. 1 Box 122F</td> <td>Lapwai</td> <td>Id.</td> <td>83540</td> </tr> <tr> <td>Directors:</td> <td>Robert Tomlinson</td> <td>Rt. 1 Box 122F</td> <td>Lapwai</td> <td>Id.</td> <td>83540</td> </tr> </tbody> </table> |                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                             |                                                          | <u>Name</u>                               | <u>Street or P.O. Address</u> | <u>City</u> | <u>State</u> | <u>Zip</u> | President: | Marion Tomlinson | Rt.1 Box 122F | Lapwai | Id. | 83540 | Secretary: | Guy McDowell | Rt. 1 Box 122F | Lapwai | Id. | 83540 | Directors: | Robert Tomlinson | Rt. 1 Box 122F | Lapwai | Id. | 83540 |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <u>Name</u>                                                                                                                                                                                                                                                                                                                                                                                                                         | <u>Street or P.O. Address</u>                                                                                                                                                                               | <u>City</u>                                              | <u>State</u>                              | <u>Zip</u>                    |             |              |            |            |                  |               |        |     |       |            |              |                |        |     |       |            |                  |                |        |     |       |
| President:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Marion Tomlinson                                                                                                                                                                                                                                                                                                                                                                                                                    | Rt.1 Box 122F                                                                                                                                                                                               | Lapwai                                                   | Id.                                       | 83540                         |             |              |            |            |                  |               |        |     |       |            |              |                |        |     |       |            |                  |                |        |     |       |
| Secretary:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Guy McDowell                                                                                                                                                                                                                                                                                                                                                                                                                        | Rt. 1 Box 122F                                                                                                                                                                                              | Lapwai                                                   | Id.                                       | 83540                         |             |              |            |            |                  |               |        |     |       |            |              |                |        |     |       |            |                  |                |        |     |       |
| Directors:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Robert Tomlinson                                                                                                                                                                                                                                                                                                                                                                                                                    | Rt. 1 Box 122F                                                                                                                                                                                              | Lapwai                                                   | Id.                                       | 83540                         |             |              |            |            |                  |               |        |     |       |            |              |                |        |     |       |            |                  |                |        |     |       |
| 5. Nature of Business<br><br><i>Fire &amp; safety Equip.</i>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.<br><br><table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">           Signature <i>Guy McDowell</i><br/>           Name (Typed or Printed)         </td> <td style="width: 40%;">           Date <i>10-13-88</i><br/>           Title <i>Secy</i> </td> </tr> </table> |                                                                                                                                                                                                             | Signature <i>Guy McDowell</i><br>Name (Typed or Printed) | Date <i>10-13-88</i><br>Title <i>Secy</i> |                               |             |              |            |            |                  |               |        |     |       |            |              |                |        |     |       |            |                  |                |        |     |       |
| Signature <i>Guy McDowell</i><br>Name (Typed or Printed)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Date <i>10-13-88</i><br>Title <i>Secy</i>                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                             |                                                          |                                           |                               |             |              |            |            |                  |               |        |     |       |            |              |                |        |     |       |            |                  |                |        |     |       |