| | INSTRUCTION | QNS ON REVERSE,SIDE | | nation to |
|---|--|--|------------------------------|-----------------------|
| No. 97254 | Idaho Corporation Annual Report Form | | 2. Registered Agent and | Office NOT A P.O. BOX |
| Return To Secretary of State Room 203, Statehouse Boise, ID 83720 | Due No Later Than November 1, | | CARLEEN WILL | |
| | 1. Mailing Address Paraga Caraga pate programmers | | 5459 GLENWOOD | |
| | GATHERING PLACE, INC. (THE) CARLEEN WILL 5459 GLENWOOD | | BOISE Y | ID 93714 |
| | | | 3. Incorporated Under Tr | e Laws |
| * FIRST NOTICE * NO FEE REQUIRED | BOISE | ID 83714 | NO: 97254 | |
| 4. Names and Addresses of Officers and Directors MUST BE PRINTED OR TYPED | | | | |
| | Name | Street or P.O. Address | City | State Zip |
| President: Carlean Secretary: SHANNON Directors: | F. WILL BOOTA | 5459 Glenwood 8 618 So Owy | hee Boise, | ID 837/4 ID 83705 |
| | | | | - |
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| | | | · r | |
| 5. Nature of Business | 6. I certify that | this Annual Report has been exa | mained by me and is to the b | est of my knowledge |
| Banquet | Signature Name (Typed or Printed) | and complete. Action F. 1. Cactoon F. 1. | Date Title | My 8/993 |
| | ************************************** | | | |