

92971

INSTRUCTIONS ON REVERSE SIDE PLEASE TYPE OR PRINT

No.	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  * FIRST NOTICE * NO FEE REQUIRED	Due No Later Than November 1, 1992	C.P. HOOVER HWY 93																								
	1. Mailing Address - Please Correct If Not Correct  MACHINERY LEASING INCORPORATED C.P. HOOVER P.O. BOX 628  CHALLIS ID 83226 0000	CHALLIS ID 83226  3. Incorporated Under The Laws of ID NO: 92971																								
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>Zip</th> </tr> </thead> <tbody> <tr> <td>President:</td> <td>C.P. Hoover</td> <td>Box 628</td> <td>Challis</td> <td>ID</td> <td>83226</td> </tr> <tr> <td>Secretary:</td> <td>Maxine Hoover</td> <td>Box 628</td> <td>Challis</td> <td>ID</td> <td>83226</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	Zip	President:	C.P. Hoover	Box 628	Challis	ID	83226	Secretary:	Maxine Hoover	Box 628	Challis	ID	83226	Directors:					
	Name	Street or P.O. Address	City	State	Zip																					
President:	C.P. Hoover	Box 628	Challis	ID	83226																					
Secretary:	Maxine Hoover	Box 628	Challis	ID	83226																					
Directors:																										
5. Nature of Business  Leasing <del>XXXXXX</del>	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>Maxine Hoover</u> Date <u>10-1-92</u> Name (Typed or Printed) <u>Maxine Hoover</u> Title <u>Vice Pres.</u>																									