

December 21, 1994

HAMILTON MANUFACTURING, INC.  
TAMARA HARNEY  
PO BOX 1426  
TWIN FALLS ID 83303

RE: HAMILTON MANUFACTURING, INC. File Number C 84571

Dear Ms. Harney:

Please find enclosed your recently submitted annual report for the 1994-1995 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.

The annual report must be signed by an officer of the corporation. We will accept an annual report signed by the president, vice-president, secretary, treasurer, assistant secretary, comptroller, or a director. A report signed by the registered agent, attorney, manager, or bookkeeper will not be accepted.

If you have any questions or need further assistance, please do not hesitate to contact this office at (208) 334-2301.

Very truly yours,

Tonya Herold  
Corporate Division

Enclosures: cited

## INSTRUCTIONS ON REVERSE SIDE

No. <b>83521</b>	<b>Idaho Corporation Annual Report Form</b> Due No Later Than November 1, 95		2. Registered Agent and Office  <b>TAMARA HARNEY</b> <b>118 MARKET ST</b> <b>TWIN FALLS ID 83303</b>																									
Return To  Secretary of State Room 203, Statehouse Boise, ID 83720  <b>FORFEITED 12/1/94 STATE</b> <b>FEE DUE: \$80.00</b> <b>if received by 12/1/95 94</b>	1. Mailing Address — Please Correct  <b>HAMILTON MANUFACTURING, INC.</b> <b>TAMARA HARNEY</b> <b>PO BOX 1426</b> <b>TWIN FALLS ID 83303</b>		3. Incorporated Under The Laws of <b>Idaho #84571</b>																									
4. Names and Addresses of Officers and Directors																												
<table border="1"> <thead> <tr> <th data-bbox="16 406 393 444"></th> <th data-bbox="399 406 697 444"><u>Name</u></th> <th data-bbox="703 406 1040 444"><u>Street or P.O. Address</u></th> <th data-bbox="1047 406 1291 444"><u>City</u></th> <th data-bbox="1298 406 1424 444"><u>State</u></th> <th data-bbox="1430 406 1585 444"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td data-bbox="16 449 393 508">President:</td> <td data-bbox="399 449 697 508">TAMARA HARNEY</td> <td data-bbox="703 449 1040 508">PO Box 1426</td> <td data-bbox="1047 449 1291 508">Twin Falls</td> <td data-bbox="1298 449 1424 508">Id</td> <td data-bbox="1430 449 1585 508">83303</td> </tr> <tr> <td data-bbox="16 502 393 551">Secretary:</td> <td data-bbox="399 502 697 551">Nerb Harney</td> <td data-bbox="703 502 1040 551">PO Box 1426</td> <td data-bbox="1047 502 1291 551">Twin Falls</td> <td data-bbox="1298 502 1424 551">Id</td> <td data-bbox="1430 502 1585 551">83303</td> </tr> <tr> <td data-bbox="16 544 393 583">Directors:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>						<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President:	TAMARA HARNEY	PO Box 1426	Twin Falls	Id	83303	Secretary:	Nerb Harney	PO Box 1426	Twin Falls	Id	83303	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 <small>(Typed or Printed)</small>	Date Title																										