

| No. C110602 | Annual Report Form 1990 <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 ** FINAL NOTICE ** | 1. Mailing Address - Please Correct, If Not Correct WHIP FOREST MANAGEMENT, INC. ROBERT L WHIPPLE JR. 1189 ELM DRIVE ST. MARIES ID 83861 | | ROBERT L WHIPPLE JR. 1189 ELM DRIVE ST. MARIES ID 83861 3. Organized Under the Laws of: ID C110602 | | | | | | | | | | | | | | | | | | | |
| 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="1"> <thead> <tr> <th>Office held</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>ROBERT WHIPPLE JR.</td> <td>P.O. BOX 487</td> <td>St. Maries</td> <td>ID</td> <td>83861</td> </tr> <tr> <td>SEC/TREASURE</td> <td>MELINDA WHIPPLE</td> <td>P.O. BOX 487</td> <td>St. Maries</td> <td>ID</td> <td>83861</td> </tr> </tbody> </table> | | | | | Office held | Name | Street or P.O. Address | City | State | Zip | PRESIDENT | ROBERT WHIPPLE JR. | P.O. BOX 487 | St. Maries | ID | 83861 | SEC/TREASURE | MELINDA WHIPPLE | P.O. BOX 487 | St. Maries | ID | 83861 |
| Office held | Name | Street or P.O. Address | City | State | Zip | | | | | | | | | | | | | | | | | |
| PRESIDENT | ROBERT WHIPPLE JR. | P.O. BOX 487 | St. Maries | ID | 83861 | | | | | | | | | | | | | | | | | |
| SEC/TREASURE | MELINDA WHIPPLE | P.O. BOX 487 | St. Maries | ID | 83861 | | | | | | | | | | | | | | | | | |
| 5. NATURE OF BUSINESS ROAD CONSTRUCTION & LOGGING | | 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>Robert Whipple Jr.</u> Date <u>11/22/96</u> Name (Typed or Printed) <u>ROBERT WHIPPLE JR.</u> Title <u>PRESIDENT</u> | | | | | | | | | | | | | | | | | | | | |

ISSUED: 10-05-1996
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