

INSTRUCTIONS ON REVERSE SIDE

| No. 76682 Return To Secretary of State Room 203, Statehouse Boise, ID 83720 NO FEE REQUIRED | Idaho Corporation Annual Report Form Due No Later Than November 1, 1991 1. Mailing Address: <i>Please Correct If Not Correct</i> APPALOON PLACERS, INC. HICKS & FRACHISEUR P. O. BOX 724 MOUNTAIN HOME ID 83647 | 2. Registered Agent and Office NOT A P.O. BOX SANTIAGO MORIN 403 EAST 5TH STREET GLENN'S FERRY ID 83623 3. Incorporated Under The Laws of ID NO: 076682 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|---|--|--|---|-------------------------------|-------------|--------------|------------|------------|-----------------------|----------------|---------------------|-----------|--------------|------------|-----------------------|----------------|---------------------|-----------|--------------|------------|--|--|--|--|--|----------------|--------------------------|----------------|---------------------|-----------|--------------|
| 4. Names and Addresses of Officers and Directors <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;"></th> <th style="width: 35%; 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: 15%; text-align: center;"><u>City</u></th> <th style="width: 10%; text-align: center;"><u>State</u></th> <th style="width: 15%; text-align: center;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President:</td> <td><i>Santiago Morin</i></td> <td><i>Box 744</i></td> <td><i>Glenns Ferry</i></td> <td><i>Id</i></td> <td><i>83623</i></td> </tr> <tr> <td>Secretary:</td> <td><i>Carol Phillips</i></td> <td><i>Box 172</i></td> <td><i>Glenns Ferry</i></td> <td><i>Id</i></td> <td><i>83623</i></td> </tr> <tr> <td>Directors:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Vice President</td> <td><i>James L. Phillips</i></td> <td><i>Box 172</i></td> <td><i>Glenns Ferry</i></td> <td><i>Id</i></td> <td><i>83623</i></td> </tr> </tbody> </table> | | | | <u>Name</u> | <u>Street or P.O. Address</u> | <u>City</u> | <u>State</u> | <u>Zip</u> | President: | <i>Santiago Morin</i> | <i>Box 744</i> | <i>Glenns Ferry</i> | <i>Id</i> | <i>83623</i> | Secretary: | <i>Carol Phillips</i> | <i>Box 172</i> | <i>Glenns Ferry</i> | <i>Id</i> | <i>83623</i> | Directors: | | | | | | Vice President | <i>James L. Phillips</i> | <i>Box 172</i> | <i>Glenns Ferry</i> | <i>Id</i> | <i>83623</i> |
| | <u>Name</u> | <u>Street or P.O. Address</u> | <u>City</u> | <u>State</u> | <u>Zip</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Secretary: | <i>Carol Phillips</i> | <i>Box 172</i> | <i>Glenns Ferry</i> | <i>Id</i> | <i>83623</i> | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Vice President | <i>James L. Phillips</i> | <i>Box 172</i> | <i>Glenns Ferry</i> | <i>Id</i> | <i>83623</i> | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 5. Nature of Business <i>Construction</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. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"> Signature <i>Carol Phillips</i> Name (Typed or Printed) <i>CAROL PHILLIPS</i> </td> <td style="width: 40%;"> Date <i>7-15-91</i> Title <i>Secretary</i> </td> </tr> </table> | | Signature <i>Carol Phillips</i> Name (Typed or Printed) <i>CAROL PHILLIPS</i> | Date <i>7-15-91</i> Title <i>Secretary</i> | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Signature <i>Carol Phillips</i> Name (Typed or Printed) <i>CAROL PHILLIPS</i> | Date <i>7-15-91</i> Title <i>Secretary</i> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |