

No. C 96049	Annual Report Form 1996 Due No Later Than November 30,		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 * FIRST NOTICE *	1. Mailing Address - Please Correct, If Not Correct WILLIAMS INLAND DISTRIBUTORS DREYERS ICE CREAM W 1913 MAXWELL SPOKANE WA 99201		NATIONAL REGISTERED AGENT 512 W BANNOCK BOISE ID 83702 3. Organized Under the Laws of: WA C 96049												
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>ROBEA WILLIAMS</td> <td>1913 W. MAXWELL</td> <td>SPOKANE</td> <td>WA</td> <td>99201</td> </tr> </tbody> </table>				Office held	Name	Street or P.O. Address	City	State	Zip	PRESIDENT	ROBEA WILLIAMS	1913 W. MAXWELL	SPOKANE	WA	99201
Office held	Name	Street or P.O. Address	City	State	Zip										
PRESIDENT	ROBEA WILLIAMS	1913 W. MAXWELL	SPOKANE	WA	99201										
5. NATURE OF BUSINESS DISTRIBUTE ICE CREAM &	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>Robea Williams</u> Date <u>7/12/96</u> Name <small>(Typed or Printed)</small> <u>ROBEA A WILLIAMS</u> Title <u>PRESIDENT</u>														

ISSUED: 07-06-1996

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