

No. 5901	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 NO FEE REQUIRED	Due No Later Than November 1, 1991		RONNIE J. ROSE																									
	1. Mailing Address Please Correct If Not Correct		1839 MAIN STREET																									
	IDAHO PETROLEUM, INC. RONNIE J. ROSE 1839 MAIN ST. PO BOX 327 LEWISTON ID 83501		LEWISTON ID 83501																									
3. Incorporated Under The Laws of ID																												
NO: 065901																												
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><i>F. M. Dompier</i></td> <td><i>Box 4065</i></td> <td><i>Spokane</i></td> <td><i>WA</i></td> <td><i>99202</i></td> </tr> <tr> <td>Secretary:</td> <td><i>R. J. Rose</i></td> <td><i>625 Airway</i></td> <td><i>Lewiston</i></td> <td><i>ID</i></td> <td><i>83501</i></td> </tr> <tr> <td>Directors:</td> <td><i>M. W. Sater</i></td> <td><i>605 Burnell Dr</i></td> <td><i>Lewiston</i></td> <td><i>ID</i></td> <td><i>83501</i></td> </tr> </tbody> </table>						Name	Street or P.O. Address	City	State	Zip	President:	<i>F. M. Dompier</i>	<i>Box 4065</i>	<i>Spokane</i>	<i>WA</i>	<i>99202</i>	Secretary:	<i>R. J. Rose</i>	<i>625 Airway</i>	<i>Lewiston</i>	<i>ID</i>	<i>83501</i>	Directors:	<i>M. W. Sater</i>	<i>605 Burnell Dr</i>	<i>Lewiston</i>	<i>ID</i>	<i>83501</i>
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5. Nature of Business <i>Wholesale Petroleum</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.																											
	Signature <i>R. J. Rose</i> Date <i>8/15/91</i> Name (Typed or Printed) <i>Ronnie J. Rose</i> Title <i>Sec</i>																											