

No. C 57325	Annual Report Form Due No Later Than November 30, 1997		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		GLADE WASDEN 4600 SOUTH 3300 WEST REXBURG ID 83440																															
	WESTERN FENCE INCORPORATED GLADE WASDEN 39 PROFESSIONAL PLAZA REXBURG ID 83440		3 Organized Under the Laws of ID C 57325																															
	4. Corporations: Enter Names and Business 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" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Office held</th> <th style="width: 20%;">Name</th> <th style="width: 30%;">Street or P.O. Address</th> <th style="width: 15%;">City</th> <th style="width: 10%;">State</th> <th style="width: 10%;">Zip</th> </tr> </thead> <tbody> <tr> <td>President:</td> <td>Glade Wasden</td> <td>4600 South 3300 West</td> <td>Rexburg</td> <td>ID</td> <td>83440</td> </tr> <tr> <td>Secretary:</td> <td>Kay Wasden</td> <td>4600 South 3300 West</td> <td>Rexburg</td> <td>ID</td> <td>83440</td> </tr> <tr> <td>Directors:</td> <td>Glade Wasden</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td>Kay Wasden</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>					Office held	Name	Street or P.O. Address	City	State	Zip	President:	Glade Wasden	4600 South 3300 West	Rexburg	ID	83440	Secretary:	Kay Wasden	4600 South 3300 West	Rexburg	ID	83440	Directors:	Glade Wasden						Kay Wasden				
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5.		6.																																
Signature <u>Glade Wasden</u>		Date <u>July 15-97</u>																																
Name (Typed or Printed) _____		Title <u>Pres</u>																																

ISSUED: 07-04-1997

↓ DO NOT TAPE OR STAPLE ↓

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