

| No. 81026   | <b>Idaho Corporation Annual Report Form</b>                  |  | 2. Registered Agent and Office NOT A P.O. BOX      |       |           |                    |                        |         |                         |                 |            |                 |         |         |    |       |            |                 |     |   |   |   |            |                 |     |   |   |   |  |                 |     |   |   |   |
|---|--|--|--|-------|-----------|--------------------|------------------------|---------|-------------------------|-----------------|------------|-----------------|---------|---------|----|-------|------------|-----------------|-----|---|---|---|------------|-----------------|-----|---|---|---|--|-----------------|-----|---|---|---|
| Return To<br><br><b>Secretary of State<br/>Room 203, Statehouse<br/>Boise, ID 83720</b><br><br>NO FEE REQUIRED  | Due No Later Than November 1, 1991                           |  | FRED K. O'BRIEN                                    |       |           |                    |                        |         |                         |                 |            |                 |         |         |    |       |            |                 |     |   |   |   |            |                 |     |   |   |   |  |                 |     |   |   |   |
|   | 1. Mailing Address Please Correct If Not Correct             |  | <del>108 PINE STREET</del>                         |       |           |                    |                        |         |                         |                 |            |                 |         |         |    |       |            |                 |     |   |   |   |            |                 |     |   |   |   |  |                 |     |   |   |   |
|   | THUNDER MOUNTAIN PUBLISHERS<br>FRED K. O'BRIEN<br>PO BOX 548 |  | 112 MAIN STREET<br>CASCADE ID 83611                |       |           |                    |                        |         |                         |                 |            |                 |         |         |    |       |            |                 |     |   |   |   |            |                 |     |   |   |   |  |                 |     |   |   |   |
|   | CASCADE ID 83611   |  | 3. Incorporated Under The Laws of ID<br>NO: 081026 |       |           |                    |                        |         |                         |                 |            |                 |         |         |    |       |            |                 |     |   |   |   |            |                 |     |   |   |   |  |                 |     |   |   |   |
| 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>FRED K. O'BRIEN</td> <td>Box 548</td> <td>CASCADE</td> <td>ID</td> <td>83611</td> </tr> <tr> <td>Secretary:</td> <td>ELZO E. O'BRIEN</td> <td>✓ ✓</td> <td>✓</td> <td>✓</td> <td>✓</td> </tr> <tr> <td>Directors:</td> <td>FRED K. O'BRIEN</td> <td>✓ ✓</td> <td>✓</td> <td>✓</td> <td>✓</td> </tr> <tr> <td></td> <td>ELZO E. O'BRIEN</td> <td>✓ ✓</td> <td>✓</td> <td>✓</td> <td>✓</td> </tr> </tbody> </table> |  |  |  |       |           | Name               | Street or P.O. Address | City    | State                   | Zip             | President: | FRED K. O'BRIEN | Box 548 | CASCADE | ID | 83611 | Secretary: | ELZO E. O'BRIEN | ✓ ✓ | ✓ | ✓ | ✓ | Directors: | FRED K. O'BRIEN | ✓ ✓ | ✓ | ✓ | ✓ |  | ELZO E. O'BRIEN | ✓ ✓ | ✓ | ✓ | ✓ |
|   | Name   | Street or P.O. Address   | City   | State | Zip       |                    |                        |         |                         |                 |            |                 |         |         |    |       |            |                 |     |   |   |   |            |                 |     |   |   |   |  |                 |     |   |   |   |
| President:  | FRED K. O'BRIEN  | Box 548  | CASCADE  | ID    | 83611     |                    |                        |         |                         |                 |            |                 |         |         |    |       |            |                 |     |   |   |   |            |                 |     |   |   |   |  |                 |     |   |   |   |
| Secretary:  | ELZO E. O'BRIEN  | ✓ ✓  | ✓  | ✓     | ✓         |                    |                        |         |                         |                 |            |                 |         |         |    |       |            |                 |     |   |   |   |            |                 |     |   |   |   |  |                 |     |   |   |   |
| Directors:  | FRED K. O'BRIEN  | ✓ ✓  | ✓  | ✓     | ✓         |                    |                        |         |                         |                 |            |                 |         |         |    |       |            |                 |     |   |   |   |            |                 |     |   |   |   |  |                 |     |   |   |   |
|   | ELZO E. O'BRIEN  | ✓ ✓  | ✓  | ✓     | ✓         |                    |                        |         |                         |                 |            |                 |         |         |    |       |            |                 |     |   |   |   |            |                 |     |   |   |   |  |                 |     |   |   |   |
| 5. Nature of Business<br><br>Newspaper  |  | 6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.<br><br><table border="1"> <tr> <td>Signature</td> <td><i>[Signature]</i></td> <td>Date</td> <td>7-25-91</td> </tr> <tr> <td>Name (Typed or Printed)</td> <td>FRED K. O'BRIEN</td> <td>Title</td> <td>President</td> </tr> </table> |  |       | Signature | <i>[Signature]</i> | Date                   | 7-25-91 | Name (Typed or Printed) | FRED K. O'BRIEN | Title      | President       |         |         |    |       |            |                 |     |   |   |   |            |                 |     |   |   |   |  |                 |     |   |   |   |
| Signature   | <i>[Signature]</i>   | Date   | 7-25-91  |       |           |                    |                        |         |                         |                 |            |                 |         |         |    |       |            |                 |     |   |   |   |            |                 |     |   |   |   |  |                 |     |   |   |   |
| Name (Typed or Printed)   | FRED K. O'BRIEN  | Title  | President  |       |           |                    |                        |         |                         |                 |            |                 |         |         |    |       |            |                 |     |   |   |   |            |                 |     |   |   |   |  |                 |     |   |   |   |