

Annual Report Form
Due No Later Than November 30,

1998

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

OLSON'S EXCAVATING, INC.
THOMAS N. OLSON
P. O. BOX 487

CASCADE

ID 83611

THOMAS N. OLSON
HIGHWAY 55

CASCADE

ID 83611

3. Organized Under the Laws of:

ID

C 72942

4. Corporations: Enter Names and Business Addresses of **President, Secretary and Directors**
Limited Liability Companies: Enter Names and Addresses of ☐ **Managers** or ☐ **Members** (check one)

Office held

Name

Street or P.O. Address

City

State

Zip

President TOM OLSON Box 487
Vice pres, Sec Frances Olson "

Cascade, Ida 83611
" " "

5. Signature of New Registered Agent

6.

Signature

Frances Olson Date 7/15/98

Name (Typed or Printed)

Frances Olson Title Sec

ISSUED: 07-03-1998

13529

DO NOT TAPE OR STAPLE