

INSTRUCTIONS ON REVERSE SIDE

Idaho Corporation Annual Report Form

Due No Later Than November 30, 1995

1. Mailing Address -- Please Correct If Not Correct

FOUSTS, INC.

HELEN FOUST

P O BOX 268

BONNERS FERRY

ID 83805

2. Registered Agent and Office NOT A P.O. BOX

HELEN FOUST

P O BOX 268

BONNERS FERRY ID 83805

3. Incorporated Under The Laws of

ID

NO: 51346

No. 51346

Return To

Secretary of State

700 W Jefferson

P.O. Box 83720

Boise, ID 83720-0080

* FIRST NOTICE *

NO FEE REQUIRED

4. Names and Addresses of Officers and Directors

	Name	Street or P.O. Address	City	State	Postal Code
President:	Helen Foust	PO Box 268	Bonn timers Ferry	Id	83805
Secretary:	Thomas Foust	PO Box 915	Bonn timers Ferry	Id	83805
Directors:	Timothy Foust	N. 500 Circle S Trail	Rathdrum	Id	83858

5. Nature of Business

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

Name

(Typed or Printed)

Date

Title

Thomas C. Foust
 THOMAS C. FOUST

10-18-95

Sec.