

No. C115311	Annual Report Form 1995 Due No Later Than November 30,		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 R & M WARD, INC. RONNY KAY WARD 1007 CAHOON POCATELLO ID 83201		RONNY KAY WARD 1007 CAHOON POCATELLO ID 83201																														
	3. Organized Under the Laws of: ID C115311																																
4. Corporations: Enter Names and 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 style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 10%;"><u>Office held</u></th> <th style="text-align: left; width: 20%;"><u>Name</u></th> <th style="text-align: left; width: 30%;"><u>Street or P.O. Address</u></th> <th style="text-align: left; width: 15%;"><u>City</u></th> <th style="text-align: left; width: 10%;"><u>State</u></th> <th style="text-align: left; width: 15%;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Ron K. Ward</td> <td>1007 Cahoon</td> <td>Pocatello,</td> <td>ID</td> <td>83201</td> </tr> <tr> <td>Secretary</td> <td>Marianne Ward</td> <td>1007 Cahoon</td> <td>Pocatello,</td> <td>ID</td> <td>83201</td> </tr> <tr> <td>Director</td> <td>William Dow Decker</td> <td>6670 Schuster</td> <td>Las Vegas,</td> <td>NV</td> <td>89118</td> </tr> <tr> <td>Director</td> <td>Constance Huntsman Decker</td> <td>6670 Schuster,</td> <td>Las Vegas,</td> <td>NV</td> <td>89118</td> </tr> </tbody> </table>				<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President	Ron K. Ward	1007 Cahoon	Pocatello,	ID	83201	Secretary	Marianne Ward	1007 Cahoon	Pocatello,	ID	83201	Director	William Dow Decker	6670 Schuster	Las Vegas,	NV	89118	Director	Constance Huntsman Decker	6670 Schuster,	Las Vegas,	NV	89118
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5. NATURE OF BUSINESS <i>Day Care</i> ANY LAWFUL		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>Marianne Ward</i> Date <u>7/15/96</u> Name (Typed or Printed) <u>Marianne Ward</u> Title <u>Secretary</u>																															

ISSUED: 07-06-1995

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