

No. C 60551	Annual Report Form 1996 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	1. Mailing Address - Please Correct, If Not Correct		JAMES RALPH MCCAULEY 1345 E. STATE ST EAGLE ID 83616							
	SUMMIT DISTRIBUTING, INC. JAMES RALPH MCCAULEY 1345 E. STATE ST EAGLE ID 83616		3. Organized Under the Laws of:							
* FIRST NOTICE * EAGLE ID 83616 ID C 60551										
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 border="0" style="width:100%"> <tr> <td style="text-align:center"><u>Office held</u></td> <td style="text-align:center"><u>Name</u></td> <td style="text-align:center"><u>Street or P.O. Address</u></td> <td style="text-align:center"><u>City</u></td> <td style="text-align:center"><u>State</u></td> <td style="text-align:center"><u>Zip</u></td> </tr> </table>					<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>					
James PRESIDENT JAMES R MCCAULEY 2611 W. STATE EAGLE ID 83616										
SECRETARY ARLENE MCCAULEY 2611 W. STATE EAGLE ID 83616										
5. NATURE OF BUSINESS FOODSERVICE DISTRIBUTOR		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 <u><i>James R. McCauley</i></u> Date <u>8/6/96</u> Name (Typed or Printed) <u>JAMES R. MCCAULEY</u> Title <u>PRESIDENT</u>								

ISSUED: 07-06-1996

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