

INSTRUCTIONS ON REVERSE SIDE

No. 78384	Idaho Corporation Annual Report Form Due No Later Than November 1, 1991		2. Registered Agent and Office NOT A P.O. BOX LEONARD S. SCHULTE 903 MAIN STREET BONNERS FERRY ID 83805																															
Return To Secretary of State Room 203, Statehouse Boise, ID 83720 NO FEE REQUIRED	(Mailing Address - Please Correct If Not Correct) KOOTENAI RIVER TREE PLANTAT GEORGE N. JAMES P.O. Box 977 Robert D. Pluid P.O. Box 143 Bonnors Ferry Moyle Springs ID 83845		3. Incorporated Under The Laws of ID NO: 078384																															
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>Robert D. Pluid</td> <td>HCR 62 Box 119</td> <td>Moyle Springs</td> <td>Id</td> <td>83845</td> </tr> <tr> <td>Secretary:</td> <td>Jaylyn Hayden</td> <td>P.O. Box 1076</td> <td>Bonnors Ferry</td> <td>Id</td> <td>83805</td> </tr> <tr> <td>Directors:</td> <td>Bill R. Hayden</td> <td>P.O. Box 1076</td> <td>Bonnors Ferry</td> <td>Id</td> <td>83805</td> </tr> <tr> <td></td> <td>Kimberly A. Pluid</td> <td>HCR 62 Box 119</td> <td>Moyle Springs, Id</td> <td></td> <td>83805</td> </tr> </tbody> </table>						Name	Street or P.O. Address	City	State	Zip	President:	Robert D. Pluid	HCR 62 Box 119	Moyle Springs	Id	83845	Secretary:	Jaylyn Hayden	P.O. Box 1076	Bonnors Ferry	Id	83805	Directors:	Bill R. Hayden	P.O. Box 1076	Bonnors Ferry	Id	83805		Kimberly A. Pluid	HCR 62 Box 119	Moyle Springs, Id		83805
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5. Nature of Business Trees, Farming		6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. <table border="1"> <tr> <td>Signature</td> <td></td> <td>Date</td> <td>7-19-91</td> </tr> <tr> <td>Name (Typed or Printed)</td> <td>Robert D. Pluid</td> <td>Title</td> <td>President</td> </tr> </table>			Signature		Date	7-19-91	Name (Typed or Printed)	Robert D. Pluid	Title	President																						
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