




<b>No. 35306</b>  Return To  <b>Secretary of State Room 203, Statehouse Boise, ID 83720</b>  <b>NO FEE REQUIRED</b>	<b>Idaho Corporation Annual Report Form</b>  <i>Due No Later Than November 1, 1990</i>  1. Mailing Address — <i>Please Correct</i>  <b>STONERIDGE PINES ASSOCIATION</b> <del>HALE C HARDING</del> <b>ROUTE 2, BOX 403-104</b>  <b>HARRISON ID 83833</b>	2. Registered Agent and Office  <b>BLAIR H. GLOVER</b> <b>ROUTE 2, BOX 108B</b>  <b>HARRISON ID 83833</b>  3. Incorporated Under The Laws of <b>ID</b>  <b>NO: 035306</b>																																				
4. Names and Addresses of Officers and Directors																																						
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 20%;"></th> <th style="text-align: left; width: 40%;"><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: 10%;"><u>City</u></th> <th style="text-align: left; width: 10%;"><u>State</u></th> <th style="text-align: left; width: 10%;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President:</td> <td>Catherine Scheiber</td> <td>Route 2 Box 108C</td> <td>Harrison</td> <td>ID</td> <td>83833</td> </tr> <tr> <td>Secretary:</td> <td>Blair H. Glover</td> <td>Route 2 Box 108B</td> <td>"</td> <td>"</td> <td>"</td> </tr> <tr> <td>Directors:</td> <td>Vice Pres. Lorraine Anderson,</td> <td>Route 2 Box 102B</td> <td>"</td> <td>"</td> <td>"</td> </tr> <tr> <td>Treasurer:</td> <td>Deborah M. Moore,</td> <td>Route 2 Box 105A</td> <td></td> <td>all same</td> <td></td> </tr> <tr> <td></td> <td>Michael L. Anson</td> <td>4620 East Highland Drive</td> <td>Post Falls</td> <td>ID</td> <td>83854</td> </tr> </tbody> </table>				<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President:	Catherine Scheiber	Route 2 Box 108C	Harrison	ID	83833	Secretary:	Blair H. Glover	Route 2 Box 108B	"	"	"	Directors:	Vice Pres. Lorraine Anderson,	Route 2 Box 102B	"	"	"	Treasurer:	Deborah M. Moore,	Route 2 Box 105A		all same			Michael L. Anson	4620 East Highland Drive	Post Falls	ID	83854
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5. Nature of Business <b>Nonprofit Community Service Corporation</b>	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 style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">Signature </td> <td style="width: 40%;">Date <b>Sep 10, 1990</b></td> </tr> <tr> <td>Name (Typed or Printed) <b>Blair H. Glover</b></td> <td>Title <b>Secretary</b></td> </tr> </table>		Signature 	Date <b>Sep 10, 1990</b>	Name (Typed or Printed) <b>Blair H. Glover</b>	Title <b>Secretary</b>																																
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