| | | UNDINU | UTIONS ON MEVERSE SIDE | | | | |
|---|--|--|--|---|--|----------------|--|
| Return To Secretary of State Room 203, Statehouse Boise, ID 83720 ROB | | | ation Annual Report Form | 2. Registered Agent and Office NOT A P.O. BOX | | | |
| | | Due No Later Than November 1, 1991 | | VICKI M. SWANK | | | |
| | | T. Mailting Address | Mailing Address - Phase Correct If Not Correct | | 227 SOUTH MAIN | | |
| | | NPC, INC. ROBERT E. KNIEFEL P. O. DRAWER B | | PAYETTE | ID | 83651 | |
| | | | | 3. Incorporated Under The Laws of | | | |
| NO FEE R | EQUIRED | PAYETTE | ID 83661 | NO: 061418 | | | |
| 4. Names and Ad | dresses of Office | rs and Directors |) | | ······································ | | |
| 1 | | Name | Street or P.O. Address | City | State | <u>Zip</u> | |
| President: Secretary: | R. Dean Fullmer Robert Kniefel Jim McQueen | | P.O. Box 280 | Menan | ID | 83661 | |
| Directors: | | | 2375 Center Avenu 1330 U.S. Highway | | ID ID | 83661 83672 | |
| Í | Steven | = | 621 Foothill Driv | | OR | 97914 | |
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| 5. Nature of Busin | 1088 | 6. I certify t | hat this Annual Report has been exa | amined by me and is to the I | best of my | knowledge | |
| Corporate | e office f | or true, com | ect and complete. | • | 7/15/ | _ | |
| **** | ying facil | ity in Signature | licki M. Dune | | o mot | over_ | |
| N(| | Name //ped | i VICTI M. Swan | Title Co | <u>omptr</u> | suer | |