

No. C 54251	Annual Report Form Due No Later Than November 30, 1997		2. Registered Agent and Office NOT A P.O. BOX LOREN R. ARFMANN 522 MAIN STREET SALMON ID 83467								
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 ARFMANN'S DEPARTMENT STORE, LEONARD G ARFMANN 522 MAIN STREET SALMON ID 83467		3. Organized Under the Laws of ID C 54251								
4. Corporations: Enter Names and Business 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)											
Office held	Name	Street or P.O. Address	City State Zip								
PRESIDENT	LOREN R. ARFMANN	522 MAIN ST.	SALMON ID 83467								
SECRETARY	ELENE A. ARFMANN	522 MAIN ST.	SALMON ID 83467								
DIRECTORS: LOREN ARFMANN ELENE ARFMANN											
5.	6. <table style="width: 100%; border: none;"> <tr> <td style="border: none;">Signature</td> <td style="border: none;"><i>Loren Arfmann</i></td> <td style="border: none;">Date</td> <td style="border: none;">7/11/97</td> </tr> <tr> <td style="border: none;">Name (Typed or Printed)</td> <td style="border: none;">LOREN ARFMANN</td> <td style="border: none;">Title</td> <td style="border: none;">PRESIDENT</td> </tr> </table>			Signature	<i>Loren Arfmann</i>	Date	7/11/97	Name (Typed or Printed)	LOREN ARFMANN	Title	PRESIDENT
Signature	<i>Loren Arfmann</i>	Date	7/11/97								
Name (Typed or Printed)	LOREN ARFMANN	Title	PRESIDENT								

ISSUED: 07-04-1997

↓ DO NOT TAPE OR STAPLE ↓

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