INSTRUCTIONS ON REVERSE SIDE

No. 109915

Idaho Corporation Annual Report Form

Due No Later Than November 30

Return To

Secretary of State
700 W Jefferson
P.O. Box 83720
Boise, ID 83720-0080

* FIRST NOTICE *
NO FEE REQUIRED

1. Mailing Address – Please Correct If Not Correct

ST JOE SNOW RIDERS SNOWMOBILE C
C L PERKINS
PO BOX 127

ST. MARIES ID 83861

2. Registered Agent and Office NOT A P.O. BOX

C L PERKINS
PO BOX 127
2 MILES BELOW ST. JOE CITY
ST. MARIES ID 83861

3. Incorporated Under The Laws of

ID
NO: 109915

4. Names and Addresses of Officers and Directors

	Name	Street or P.O. Address	City	State	Postal Code
President:	C.L. PERKINS	P O BOX 127	ST MARIES	ID	83861
Secretary:	CELIA SIBERT	280 MONROE	ST MARIES	ID	83861
Directors:	TROY SIBERT	280 MONROE	ST MARIES	ID	83861
	RICK TAISEY	1916 MAIN	ST MARIES	ID	83861
	LEE ST JOHN	P O BOX 119	ST MARIES	ID	83861
	ELLIS VAWTER	P O BOX 194	ST MARIES	ID	83861
	ANTHONY PICCININI	P O BOX 36	AVERY	ID	83802
	BEN SCHEFFELMAIER	P O BOX 66	AVERY	ID	83802
	ROY HART	HC01 BOX 123	ST MARIES	ID	83861
	BRENDA WADDELL	2315 CROMWELL DR.	ST MARIES	ID	83861

5. Nature of Business

SNOWMOBILE CLUB

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 C L Perkins Date 9-01-95

Name (Typed or Printed) C.L. PERKINS Title PRESIDENT