No. <b>C 65357</b>		D	2. Registered A	2. Registered Agent and Address (NO PO BOX)				
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form  1. Mailing Address: Correct in this box if needed.  NEZ PERCE BOTTLING COMPANY GARY D PRASIL 2108 FIRST AVENUE NORTH LEWISTON ID 83501		2108 FIRST /	GARY D PRASIL 2108 FIRST AVENUE NORTH LEWISTON ID 83501  3. New Registered Agent Signature:*			
				3. <u>New</u> Register				
4. Corporations: Enter Na	mes and Busin	ess Addresses of	f President, Secretary, and Directors. Treas	surer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
PRESIDENT SECRETARY DIRECTOR DIRECTOR	TARY CHERI PRASIL TOR ROBERT W PRASIL		2108 1ST AVE N. 2108 1ST AVE N. 2108 1ST AVE N. 2108 1ST AVE N.	LEWISTON LEWISTON LEWISTON LEWISTON	ID ID ID ID	USA USA USA USA	83501 83501 83501 83501	
		6. Annual Report must be signed.*						
ID C 65357		Signature: Cheri Prasil Name (type or print): Cheri Prasil			Date: 11/04/2008 Title: Secretary			
* Electronically provided signatures are accepted as original signatures.								