

No. C100571	Annual Report Form 1996 Due No Later Than November 30,		2. Registered Agent and Office NOT A P.O. BOX C/O SALMON PUBLIC LIBRARY 204 MAIN ST SALMON ID 83467
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED ** FINAL NOTICE **	1. Mailing Address - Please Correct, If Not Correct RIVER OF NO RETURN INTERPRET RAMONA COMBS-STAUFFER C/O SALMON PUBLIC LIBRARY P O BOX 661 SALMON ID 83467		3. Organized Under the Laws of: ID C100571

4. Corporations: Enter Names and Addresses of **President, Secretary and Directors**
 Limited Liability Companies: Enter Names and Addresses of ☐ Managers or ☐ Members (check one)

Office held	Name	Street or P.O. Address	City	State	Zip
President	Wilmer Rigby	707 Broadway	Salmon	ID	83467
Director	Hadley Roberts	708 Lombard	Salmon	ID	83467
Director	Cheryl Hart	P.O. Box 267	Carmen	ID	83462
Secretary	Ramona Combs-Stauffer	Rt. 1, Box 65	Salmon	ID	83467
Director	Faye Coiner	Rt. 1, Box 255 B	Salmon	ID	83467

5. NATURE OF BUSINESS INTERPRETIVE PROGRAMS	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 <u>Ramona Combs-Stauffer</u> Date <u>11/15/1996</u> Name (Typed or Printed) <u>Ramona Combs-Stauffer</u> Title <u>Secretary</u>
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ISSUED: 10-05-1996 3453