o. c105824	Annual Report Form Due No Later Than November 30,		nt and Office NOT	A P.O. BOX
eturn to: SECRETARY OF STATE	1. Mailing Address - Please Correct, If Not Correct	BETTY 1	HILKS Edar	\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	BETTY WILKS	GENESEE	ID	83832
NO FEE REQUIRED		3. Organized Unde	er the Laws of	
* FIRST NOTICE *	GENESEE ID 83832	ID	C105	324
Corporations: Enter Names and Umited Liability Companies: Ent	Business Addresses of President, Secretary and Dir er Names and Addresses of Managers or	ectors Vembers (check one)		
Office New Mame	Street or P.O. Address	City	State	Zip
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	6. Signature 2. Unick Name (Piped or BETTY WICKS		J.1 7-21-97 Sac-Tresa	23832
1550ED: 07-04-19	6. Signature 2. Unick Name (Piped or BETTY WICKS	Date Title		83832
	Signature 2. Uiil Name (Pyeed or BETTY WILKS	Date Title	7-21-97 Sec-Tress	83832