| × 1215+5 | Annual Report Form 100 | | | |
|------------------------------------|--|---|------------------|---|
| Return to: | Due No Later Than November 20 | 1.77.18 | ent and Office I | VOT A P.O. BO |
| SECRETARY OF STATE | Mailing Address - Please Correct, If No: Correct | H GFEWI | V MABIL | |
| 700 WEST JEFFERSON PO BOX 83720 | WEATHER FRONT, INC. (THE) | 45 PIN | E CT | |
| BOISE, ID 83720-0080 | I A GLENN MABILE | | | |
| NO FEE REQUIRED | 45 PINE CT | POST FA | LLS 1 | 0 8385 |
| ** FINAL NOTICE * | ROST PART | 3. Organized Under the Laws of: | | |
| Corporations: Enter Names o | 10 83854 | 10 | | |
| Limited Liability Companies: I | nter Names and Addresses of President, Secretary and Directors The Names and Addresses of Managers or Members | | <u> </u> | 21646 |
| Office held Name | Members | (check one) | | |
| ^ | Street or P O Adding | City | C4 | _ |
| (DIRECTOR) | ENN MARILE 45 PINECT F | POST FALLS | State | <u>Zip</u> |
| SECRETARY ALANG | · · · · · · · · · · · · · · · · · · · | -3. 7 A23 | 70 | 83854 |
| (DIRECTOR) | I J. MABILE 45 PINE CT. P. | OST FALLS | 70 | 83854 |
| DIRECTOR ARNO | 20 L. MABILE 903 CAROLECT | 140.14 | • • | |
| | | VIENNA | VA | 22180 |
| DIRECTOR ALM | A J. MABILE 903 CAROLE CT. | 161 | | |
| Signature of New Registered | - 57 | VIEWNA | VA | 22180 |
| Now neglistered | Agent 6. | | | |
| | Signature 4. MW | 14 | | |
| | 7 | Date _ | 11-2-9 | 8 |
| ISSUED: 10-03-1 | Name Printed A. GLOWN MARIE | Title | PRESIDE | 27 |
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| | NOT TAPE OR STAPLE | . Programa in the | 0762 | _ _ |
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