

No. **C105381**

**Annual Report Form**  
**Due No Later Than November 30, 1995**

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

Return to:  
**SECRETARY OF STATE**  
**700 WEST JEFFERSON**  
**PO BOX 83720**  
**BOISE, ID 83720-0080**  
**NO FEE REQUIRED**

1. Mailing Address - Please Correct, If Not Correct

**NPT, INC.**  
**MICHAEL K SOWARDS**  
**2433 N GOVERNMENT WAY STE A**

**MICHAEL K SOWARDS**  
**2433 N GOVERNMENT WAY ST**  
**COEUR D'ALEN ID 83814**

3. Organized Under the Laws of:

**\* FIRST NOTICE \*****COEUR D'ALENE ID 83814****ID C105381**

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

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President	Michael K. Sowards	3406 Buckskin Rd	Coeur dAlene	ID	83814
Secretary	Karmen C. Sowards	3406 Buckskin Rd	Coeur dAlene	ID	83814
Director	Norman K. Sowards	1719 Finch Rd	Hayden Lake	Id	83835

5. **NATURE OF BUSINESS**  
**ENGINEERING**

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 Karmen SowardsDate 10/15/96Name (Typed or  
Printed)

Karmen Sowards

Title Secretary**ISSUED: 07-06-1996****25164**