

No. C 70044

Annual Report Form
Due No Later Than November 30,

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

SODBUSTER, INC. (THE)
PAUL LARSON Gloria Palmer
P. O. BOX 550 335 Blue Lakes Blvd. N.
Twin Falls, Id. 83301
YAKIMA WA 98907

SODBUSTER INC

335 BLUE LAKES BLVD NO

TWIN FALLS ID 83301

3. Organized Under the Laws of:

ID

C 70044

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 heldNameStreet or P.O. AddressCityStateZip

President

Gloria Palmer

335 Blue Lakes Blvd. N.

Twin Falls Id 83301

5.

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

Gloria Palmer

Date

11-24-97

Name

(Typed or Printed)

Gloria Palmer

Title

President

ISSUED: 10-04-1997

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