

No. C 32366	Annual Report Form 1996 Due No Later Than November 30,		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 * FIRST NOTICE *	1. Mailing Address - Please Correct, If Not Correct TISCO PARTS AND MACHINE, INC RALPH C. WESSELS P.O. BOX 659 LEWISTON ID 83501		RALPH C. WESSELS 529 E. 22ND. NORTH LEWISTON ID 83501 3. Organized Under the Laws of: ID C 32366																			
4. Corporations: Enter Names and Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one) <table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Ralph C. Wessels</td> <td>220 Baily Drive</td> <td>Lewiston</td> <td>ID</td> <td>83501</td> </tr> <tr> <td>Secretary</td> <td>Marva Jean Wessels</td> <td>220 Baily Drive</td> <td>Lewiston</td> <td>ID</td> <td>83501</td> </tr> </tbody> </table>					Office held	Name	Street or P.O. Address	City	State	Zip	President	Ralph C. Wessels	220 Baily Drive	Lewiston	ID	83501	Secretary	Marva Jean Wessels	220 Baily Drive	Lewiston	ID	83501
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5. NATURE OF BUSINESS PARTS & SERVICE	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>Ralph C Wessels</u> Date <u>11-18-96</u> Name (Typed or Printed) <u>Ralph C Wessels</u> Title <u>President</u>																					

ISSUED: 07-06-1996

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