

No. C 51846		Due no later than Aug 31, 2009 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. FOUSTS, INC. TOM FOUST P O BOX 268 BONNERS FERRY ID 83805-0268		RUTH ANN WILSON HWY 95 S BONNERS FERRY ID 83805			
				3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	TOM C FOUST	PO BOX 915	BONNERS FERRY	ID	USA	83805-0915	
SECRETARY	ANITA L. FOUST	PO BOX 915	BONNERS FERRY	ID	USA	83805-0915	
DIRECTOR	TOM C. FOUST	PO BOX 915	BONNERS FERRY	ID	USA	83805-0915	
DIRECTOR	ANITA L. FOUST	P.O. BOX 915	BONNERS FERRY	ID	USA	83805-0915	
5. Organized Under the Laws of: ID C 51846		6. Annual Report must be signed.* Signature: Anita Foust Name (type or print): Anita Foust Date: 06/21/2009 Title: Secretary					
Processed 06/21/2009 * Electronically provided signatures are accepted as original signatures.							