




No. 167435	Idaho Corporation Annual Report Form		2. Registered Agent and Office																									
Return To Secretary of State Room 203, Statehouse Boise, ID 83720	Due No Later Than November 1, 1988		DONNA GIFT ROUTE 1, BOX 239 BONNERS FERRY, IDAHO 83805																									
	1. Mailing Address — Please Correct 067435																											
	KOOTENAI RIVER DAYS, INC. DONNA B. GIFT R.B. Reese ROUTE 1, BOX 239 P.O. Box 892 BONNERS FERRY, IDAHO 83805		3. Incorporated Under The Laws of STATE OF IDAHO																									
4. Names and Addresses of Officers and Directors <table border="0" style="width: 100%;"> <thead> <tr> <th></th> <th style="text-align: center;"><u>Name</u></th> <th style="text-align: center;"><u>Street or P.O. Address</u></th> <th style="text-align: center;"><u>City</u></th> <th style="text-align: center;"><u>State</u></th> <th style="text-align: center;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President:</td> <td>R. B. Reese</td> <td>P.O. Box 892</td> <td>Bonnerr Ferry,</td> <td>Id.</td> <td>83805</td> </tr> <tr> <td>Secretary:</td> <td>Karen Reese</td> <td>"</td> <td>"</td> <td>"</td> <td>"</td> </tr> <tr> <td>Directors:</td> <td></td> <td>OR 228 main st.</td> <td></td> <td></td> <td></td> </tr> </tbody> </table> <div style="text-align: right; margin-top: 20px;">APR 05 1989</div>						<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President:	R. B. Reese	P.O. Box 892	Bonnerr Ferry,	Id.	83805	Secretary:	Karen Reese	"	"	"	"	Directors:		OR 228 main st.			
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5. Nature of Business		6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. <table border="0" style="width: 100%;"> <tr> <td style="width: 60%;"> Signature  Name (Typed or Printed) R. B. Reese </td> <td style="width: 40%;"> Date 2 Dec. 89 Title President </td> </tr> </table>			Signature  Name (Typed or Printed) R. B. Reese	Date 2 Dec. 89 Title President																						
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