No. <b>C 183357</b>		Due no later than Jun 30, 2011	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		Annual Report Form  1. Mailing Address: Correct in this box if needed.  MAGIC VALLEY DAIRY HEIFER REPLACEMENT PROGRAM, INC. TERESA TVERDY 246 3RD AVE TWIN FALLS ID 83301 USA	TERESA TVERDY 246 3RD AVE TWIN FALLS ID 83301  3. New Registered Agent Signature:*			
4. Corporations: Enter Nar	nes and Busin	ess Addresses of President, Secretary, and Directors. Treasurer	(optional).			
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
DIRECTOR	DEAN ALLEN	4286 N.2500 E.	FILER	ID	USA	83328
TREASURER	CHRIS JACK	SON 392 N. 300 E.	JEROME	ID	USA	83338
SECRETARY	TRAVIS FLIC	CK P.O. BOX 706	BUHL	ID	USA	83316
PRESIDENT	ALVIN KRAL	19621 HWY 30	BUHL	ID	USA	83316
5. Organized Under the Laws of:		6. Annual Report must be signed.*				
ID C 183357		Signature: Chris Jackson	Date: 06/21/2011			
		Name (type or print): Chris Jackson	Title: Treasurer			
Processed 06/21/2011 * Electronically provided signatures are accepted as original signatures.						