

No. 29677	Idaho Corporation Annual Report Form Due No Later Than November 1, 1994		2. Registered Agent and Office																																					
Return To Secretary of State Room 203, Statehouse P.O. BOX 83720 Boise, ID 83720-0080 * FIRST NOTICE * NO FEE REQUIRED	1. Mailing Address — Please Correct, if Not Correct HIGGINS, INC. C LISA HIGGINS 1051 OAKLEY AVENUE		STEVEN D HIGGINS 1051 OAKLEY AVE BURLEY ID 83318																																					
	BURLEY ID 83318		3. Incorporated Under The Laws of ID NO: 29677																																					
4. Names and Addresses of Officers and Directors																																								
<table border="1"> <thead> <tr> <th></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>Steven D. Higgins</td> <td>P.O. BOX 534</td> <td>Burley</td> <td>ID.</td> <td>83318</td> </tr> <tr> <td>Secretary:</td> <td>C. Lisa Higgins</td> <td>P.O. BOX 534</td> <td>Burley</td> <td>ID.</td> <td>83318</td> </tr> <tr> <td>Directors:</td> <td>Steven D. Higgins</td> <td>P.O. BOX 534</td> <td>Burley</td> <td>ID.</td> <td>83318</td> </tr> <tr> <td></td> <td>C. Lisa Higgins</td> <td>P.O. BOX 534</td> <td>Burley</td> <td>ID.</td> <td>83318</td> </tr> <tr> <td></td> <td>Frances G. Higgins</td> <td>P.O. BOX 534</td> <td>Burley</td> <td>ID.</td> <td>83318</td> </tr> </tbody> </table>						Name	Street or P.O. Address	City	State	Zip	President:	Steven D. Higgins	P.O. BOX 534	Burley	ID.	83318	Secretary:	C. Lisa Higgins	P.O. BOX 534	Burley	ID.	83318	Directors:	Steven D. Higgins	P.O. BOX 534	Burley	ID.	83318		C. Lisa Higgins	P.O. BOX 534	Burley	ID.	83318		Frances G. Higgins	P.O. BOX 534	Burley	ID.	83318
	Name	Street or P.O. Address	City	State	Zip																																			
President:	Steven D. Higgins	P.O. BOX 534	Burley	ID.	83318																																			
Secretary:	C. Lisa Higgins	P.O. BOX 534	Burley	ID.	83318																																			
Directors:	Steven D. Higgins	P.O. BOX 534	Burley	ID.	83318																																			
	C. Lisa Higgins	P.O. BOX 534	Burley	ID.	83318																																			
	Frances G. Higgins	P.O. BOX 534	Burley	ID.	83318																																			
5. Nature of Business HYDRAULIC DISTRIBUTOR MFG. POTATO HANDLING EQ		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 <i>C. Lisa Higgins</i> Name (Typed or Printed) C. Lisa Higgins Date 07/12/94 Title Secretary/Treasurer																																						