October 2, 1996

BARRY WILLIAMS 1277 MINK CREEK RD ARBON VALLEY ID 83212

RE: IDAHO SIMMENTAL ASSOCIATIN C 45199

Dear Barry:

Please be certain to correct the mailing address in block 1 so that you will receive the annual report next year.

Also, We noted that the registered office had been crossed off and the correction is missing. Pursuant to section 30-1-12, Idaho Code, each Idaho corporation must have and continuously maintain a registered agent/office in this state. Since the purpose of the registered office is to name a location for service of process, a street address or rural route is required.

The annual report must be signed by an authorized individual designated by the Board of the corporation. If an annual report is not filed in this office by December 3, 1996, the corporation will forfeit its right to do business in Idaho.

If you have any questions or need further assistance, please do not hesitate to contact this office at (208) 332-2811.

Very truly yours,

Sheryl DeVries
Corporate Division

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Enclosures: cited

Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED * FIRST NOTICE * THIN FALLS ID 33301 ** Corporations: Enter Names and Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of Imanagers or Members (check one) Office held Name Street or P.O. Address President President President Barry Williams Barry William	No.	C 45199	Annual Report Form Due No Later Than November 30,	2. Registered Agent and Office NOT A P.O. BOX
TOO WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED **FIRST NOTICE ** **Corporations: Enter Names and Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of Managers or Members (check one) Office held **Name **Street or P.O. Address **Janning Cor. Rd **Janning			1. Mailing Address - Please Correct. If Not Correct	
NO FEE REQUIRED ** FIRST NOTICE * THIN FALLS ID 33371 ID C 45199 4. Corporations: Enter Names and Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of Managers or Members (check one) Office held Name Street or P.O. Address /277 min Lity State Zip President Barry William's Albon Valley Car. Rd ID 833/2 Secretary Caral Waller Silver State Silver ID 833/2 Secretary Caral Waller Silver ID 83/3/2 Secretary Caral Waller Silver ID 85/3/3/2 Secretary Caral Waller Silver ID 85/3/3/2	70	00 WEST JEFFERSON	ITATOCERA JATUSMMIE CHADI	.NC
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Limited Liability Companies: Enter Names and Addresses of Managers or Members (check one) Office held Name Street or P.O. Address 1277 mini Lity State Zip President Barry William's Arbon Valley Cyk. Rd ID 8:32/2 Secretary Caral Waller Siles ID 8:3328 Jeasewer Audrey Henry 2045 8756 Decome ID 8:3338 5. NATURE OF 3USINESS 6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.	*	FIRST NOTICE *	TWIN FALLS ID 33301	ID C 45199
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5. 6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.		Secretary Car	be waller	Siles ID \$3328
Signature		Leaning and	dres Henry 2045 875E	Querome ID 85338
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