

October 2, 1996

BARRY WILLIAMS
1277 MINK CREEK RD
ARBON VALLEY ID 83212

RE: IDAHO SIMMENTAL ASSOCIATION 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

Enclosures: cited

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| No. C 45199 | Annual Report Form 1996 Due No Later Than November 30, | | 2. Registered Agent and Office NOT A P.O. BOX | |
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED * FIRST NOTICE * | 1. Mailing Address - Please Correct, If Not Correct IDAHO SIMMENTAL ASSOCIATION, 308 LANTING ROUTE 1, 2151 S.W. 2300 <i>New Contacts</i> 2181 S.W. 2300 TWIN FALLS ID 83301 | | 308 LANTING ROUTE 1, 2151 S.W. 2300 TWIN FALLS ID 83301 3. Organized Under the Laws of: ID C 45199 | |
| 4. Corporations: Enter Names and Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one) | | | | |
| <u>Office held</u> | <u>Name</u> | <u>Street or P.O. Address</u> | <u>City</u> | <u>State</u> |
| President | Barry Williams | Arbon Valley 1277 Mine Ck. Rd | ID | 83212 |
| Secretary | Carol Waller | Siler | ID | 83328 |
| Treasurer | Audrey Henry | 2045 875E Jerome | ID | 83338 |
| 5. NATURE OF BUSINESS PROMOTE SIMMENTAL CO. ILE | | 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 _____ Date _____ | | |