

10. 50758

Idaho Corporation Annual Report Form

Due No Later Than November 1, 1994

2. Registered Agent and Office NOT A P.O. BOX

CARL KIILSBAARD
W. 205 KOOTENAI
BONNERS FERRY ID 83805

Return To *J. Wain*

Secretary of State
Room 203, Statehouse
P.O. BOX 83720
Boise, ID 83720-0080

1. Mailing Address — Please Correct, If Not Correct

Kiilsgaard Farm Inc.

Peter B. Wilson
P O BOX 749
BONNERS FERRY ID 83805

3. Incorporated Under The Laws
of *Id.*

No. 50768

Names and Addresses of Officers and Directors

MUST BE PRINTED OR TYPED

	Name	Street or P.O. Address	City	State	Zip
President:	<i>Carl Kiilsgaard</i>	<i>1337 Saddle Ridge Rd.</i>	<i>Viola,</i>	<i>Id.</i>	<i>83872</i>
Secretary:	<i>Pete Wilson</i>	<i>Box 749</i>	<i>Bonnors Ferry</i>	<i>Id.</i>	<i>83805</i>
Directors:	<i>Thor Kiilsgaard</i>	<i>4604 S. Napa</i>	<i>Spokane, Wa.</i>		<i>98204</i>
	<i>Dane Kiilsgaard</i>	<i>3302 Duke St.</i>	<i>Little Rock, Ark.</i>		<i>72204</i>
	<i>Elene Roek</i>	<i>413 Pine Cliff Dr.</i>	<i>Las Vegas, Nev.</i>		<i>89124</i>
	<i>Joyce Hindman</i>	<i>RT 1 Box 1332</i>	<i>Baker City, Or.</i>		<i>97814</i>
	<i>U. of I. Keln</i>	<i>U. of Idaho</i>	<i>Moscov, Id.</i>		<i>83843</i>

Nature of Business

Land Holding

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 *Carl Kiilsgaard*

Date *9/22/94*

Name (Typed or Printed) *Carl Kiilsgaard*

Title *Pres.*