

No. C 66618	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 GARRISON PRODUCE, INC. LONNIE GARRISON 616 1ST STREET SOUTH NAMPA ID 83651		LONNIE GARRISON 616 1ST ST. S. NAMPA ID 83651 3. Organized Under the Laws of: ID C 66618												
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) <table border="0"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President</td> <td>LONNIE GARRISON</td> <td>639 6th St. North Extension</td> <td>Nampa</td> <td>ID</td> <td>83687</td> </tr> </tbody> </table>				<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President	LONNIE GARRISON	639 6th St. North Extension	Nampa	ID	83687
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>										
President	LONNIE GARRISON	639 6th St. North Extension	Nampa	ID	83687										
5. NATURE OF BUSINESS PRODUCE WHOLESALE	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 <u>Lonnie Garrison</u> Date <u>7/17/96</u> Name (Typed or Printed) <u>Lonnie Garrison</u> Title <u>President</u>														

ISSUED: 07-06-1996
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