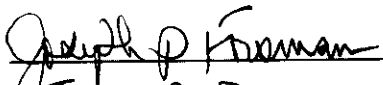
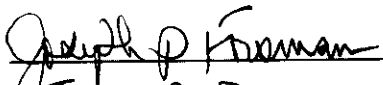
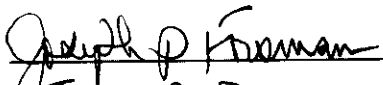


No. C 25902	Annual Report Form 1999 <i>Due No Later Than November 30,</i>		2. Registered Agent and Office NOT A P.O. BOX MARJORIE L. WREN 319 SOUTH BOULEVARD 2915 Juniper Dr., Apt #203 Lewiston, ID 83501-4757 GRANGEVILLE ID 83530												
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED * FIRST NOTICE *	1. Mailing Address - Please Correct, If Not Correct PRAIRIE RANCHES, INC. MARJORIE L. WREN 319 SOUTH BOULEVARD GRANGEVILLE ID 83530		3. Organized Under the Laws of: ID C 25902												
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of ☐ Managers or ☐ Members (check one)															
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>										
President	Shirley Stark	Rt 1, Box 44	Grangeville	ID	83530										
Vice-President	Clint Stark	Rt 1, Box 44	Grangeville	ID	83530										
Director	Marge Wren	2915 Juniper Dr., Apt #203 Lewiston, ID 83501-4757	Lewiston	ID	83501-4757										
5. Signature of New Registered Agent		6. <table style="width: 100%; border: none;"> <tr> <td style="width: 30%;">Signature</td> <td style="width: 30%; text-align: center;"></td> <td style="width: 10%;">Date</td> <td style="width: 10%; text-align: center;">8/5/99</td> <td style="width: 10%;"></td> </tr> <tr> <td>Name (Typed or Printed)</td> <td style="text-align: center;">Joseph P Forsmann</td> <td>Title</td> <td style="text-align: center;">Accountant</td> <td></td> </tr> </table>				Signature		Date	8/5/99		Name (Typed or Printed)	Joseph P Forsmann	Title	Accountant	
Signature		Date	8/5/99												
Name (Typed or Printed)	Joseph P Forsmann	Title	Accountant												

ISSUED: 07-03-1999

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