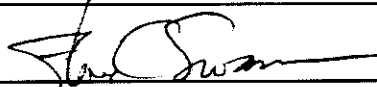
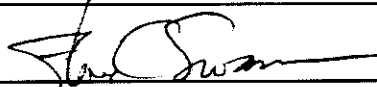
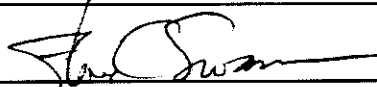


No. W 5068	Annual Report Form 1999 Due No Later Than November 30,		2. Registered Agent and Office NOT A P.O. BOX													
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED ** FINAL NOTICE **	1. Mailing Address - Please Correct. If Not Correct		STEVE C SWANSON 4208 EDMONT ST													
	ORCHARD LAND LLC STEVE C SWANSON P O BOX 396 BOISE ID 83701		BOISE ID 83706 3. Organized Under the Laws of: ID W 5068													
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input checked="" type="checkbox"/> Managers or <input type="checkbox"/> Members (check one) <table border="1" data-bbox="19 372 1465 478"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>Manager</td> <td>Steve C. Swanson</td> <td>P.O. Box 396</td> <td>Boise</td> <td>ID</td> <td>83701</td> </tr> </tbody> </table>					Office held	Name	Street or P.O. Address	City	State	Zip	Manager	Steve C. Swanson	P.O. Box 396	Boise	ID	83701
Office held	Name	Street or P.O. Address	City	State	Zip											
Manager	Steve C. Swanson	P.O. Box 396	Boise	ID	83701											
5. <u>New</u> Registered Agent Signature		6. <table border="1"> <tr> <td>Signature</td> <td></td> <td>Date</td> <td>10/5/99</td> </tr> <tr> <td>Name (Typed or Printed)</td> <td>Steve C. Swanson</td> <td>Title</td> <td>Manager</td> </tr> </table>			Signature		Date	10/5/99	Name (Typed or Printed)	Steve C. Swanson	Title	Manager				
Signature		Date	10/5/99													
Name (Typed or Printed)	Steve C. Swanson	Title	Manager													

ISSUED: 10-02-1999

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