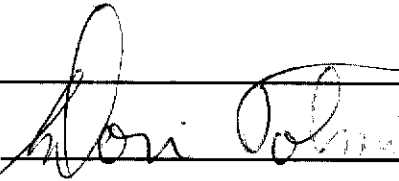


No. C 63002	Annual Report Form Due No Later Than November 30, 1997		2. Registered Agent and Office NOT A P.O. BOX																									
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED	1. Mailing Address - Please Correct, If Not Correct		DON TOLMIE 23595 WAMSTAD RD.																									
	TOLMIE FARMS, INC. DON TOLMIE 23595 WAMSTAD RD.		PARMA ID 83660																									
	PARMA ID 83660		3. Organized Under the Laws of:																									
* FIRST NOTICE *																												
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)																												
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Office held</th> <th style="width: 20%;">Name</th> <th style="width: 30%;">Street or P.O. Address</th> <th style="width: 15%;">City</th> <th style="width: 10%;">State</th> <th style="width: 10%;">Zip</th> </tr> </thead> <tbody> <tr> <td>Pres</td> <td>Don Tolmie</td> <td>23595 Wamstad</td> <td>Parma</td> <td>Id</td> <td>83660</td> </tr> <tr> <td>Sec-Treas</td> <td>Connie Tolmie</td> <td>SAME</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Director's</td> <td>Warren and Irene Tolmie</td> <td>11660 Luwarnee Ln Caldwell</td> <td></td> <td></td> <td>83605</td> </tr> </tbody> </table>					Office held	Name	Street or P.O. Address	City	State	Zip	Pres	Don Tolmie	23595 Wamstad	Parma	Id	83660	Sec-Treas	Connie Tolmie	SAME				Director's	Warren and Irene Tolmie	11660 Luwarnee Ln Caldwell			83605
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5.		6.																										
		Signature  Date <u>11/14/97</u> Name (Typed or Printed) _____ Title _____																										

ISSUED: 07-04-1997 ↓ DO NOT TAPE OR STAPLE ↓

16542