

INSTRUCTIONS ON REVERSE SIDE

ISSUED: 07-05-1994

No. 1411	Idaho Corporation Annual Report Form Due No Later Than November 1, 1994	2. Registered Agent and Office NOT A P.O. BOX
Return To Secretary of State Room 203, Statehouse P.O. BOX 83720 Boise, ID 83720-0080 * FIRST NOTICE * NO FEE REQUIRED	1. Mailing Address — Please Correct, If Not Correct FALL RIVER IRRIGATION COMPANY DALE L. SWENSEN P.O. BOX 15 ST ANTHONY ID 83445	ZANE BLOOM ROUTE 1 ST ANTHONY ID 83445 3. Incorporated Under The Laws of ID NO: 1411

4. Names and Addresses of Officers and Directors MUST BE PRINTED OR TYPED				
	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u> <u>Zip</u>
President:	ZANE BLOOM	2726 EAST 600 NORTH	ST. ANTHONY	ID 83445
Secretary:	DALE L. SWENSEN	P.O. BOX 15	ST. ANTHONY	ID 83445
Directors:	H. BEN PETERSON	403 NORTH 2700 EAST	ST. ANTHONY	ID 83445
	ACE DAW	225 NORTH 2600 EAST	ST. ANTHONY	ID 83445
	DEAN GRAHAM	4397 EAST 2000 NORTH	SUGAR CITY	ID 83448
	W. HARVEY KLEIN	2548 EAST 300 NORTH	ST. ANTHONY	ID 83445
5. Nature of Business IRRIGATION WATER DELIVERY		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>Dale L. Swensen</u> Date <u>7/15/94</u> Name (Typed or Printed) <u>Dale L. Swensen</u> Title <u>Secretary</u>		