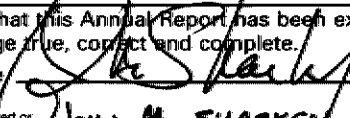


No. C110493	Annual Report Form 1996 Due No Later Than November 30,		2. Registered Agent and Office NOT A P.O. BOX																									
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED	1. Mailing Address - Please Correct, If Not Correct ROSWELL PARK & LATERAL COMPA JOHN M SHARKEY 30997 HWY 18 PARMA ID 83660		JOHN M SHARKEY 30997 HWY 18 PARMA ID 83660 3. Organized Under the Laws of: ID C110493																									
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="1" data-bbox="16 361 1458 510"> <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>PRESIDENT</td> <td>LONNIE MAGGARD</td> <td>25502 PET LANE</td> <td>PARMA</td> <td>ID</td> <td>83660</td> </tr> <tr> <td>SECRETARY</td> <td>JOHN SHARKEY</td> <td>30997 HWY 18</td> <td>PARMA</td> <td>ID</td> <td>83660</td> </tr> <tr> <td>DIRECTOR</td> <td>DENNIS SORREL</td> <td>29025 PECKHAM Rd</td> <td>WILDER</td> <td>ID</td> <td>83676</td> </tr> </tbody> </table>					Office held	Name	Street or P.O. Address	City	State	Zip	PRESIDENT	LONNIE MAGGARD	25502 PET LANE	PARMA	ID	83660	SECRETARY	JOHN SHARKEY	30997 HWY 18	PARMA	ID	83660	DIRECTOR	DENNIS SORREL	29025 PECKHAM Rd	WILDER	ID	83676
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5. NATURE OF BUSINESS IRRIGATION CANAL		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:  Date: Aug 20 1996 Name: (Typed or Printed) JOHN M. SHARKEY Title: Secretary																										

ISSUED: 07-06-1996

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