No. **W 75004**	**Due no later than Jun 30, 2011** **Annual Report Form**	2. Registered Agent and Address **(NO PO BOX)**
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 **NO FILING FEE IF RECEIVED BY DUE DATE**	**1. Mailing Address: Correct in this box if needed.** K BAR C FARMS, L.L.C. TIMOTHY J. STOVER PO BOX 5226 TWIN FALLS ID 83303-5226	TIMOTHY J STOVER 746 N COLLEGE RD STE C TWIN FALLS ID 83301 3. New Registered Agent Signature:*

4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.

Office Held	Name	Street or PO Address	City	State	Country	Postal Code
MEMBER	DAVID GANDOLFO	PO BOX 780	CASTLEFORD	ID	USA	83321
MEMBER	JAYME GANDOLFO	PO BOX 780	TWIN FALLS	ID	USA	83321

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **W 75004**	Signature: Timothy J. Stover	Date: 04/19/2011
	Name (type or print): Timothy J. Stover	Title: Registered Agent

Processed 04/19/2011

* Electronically provided signatures are accepted as original signatures.