

No. C 95459		Due no later than Jun 30, 2009 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		1. Mailing Address: Correct in this box if needed. NORTH WOODS NURSERY, INC. JAMES D. SCHWARTZ BOX 149 ELK RIVER ID 83827 USA		JAMES D. SCHWARTZ 3048 HIGHWAY 8 ELK RIVER ID 83827			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors, Treasurer (optional).							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
SECRETARY	MARLA (T) SCHWARTZ	PO BOX 149	ELK RIVER	ID	USA	83827-0149	
PRESIDENT	JAMES D SCHWARTZ	PO BOX 149	ELK RIVER	ID	USA	83827-0149	
5. Organized Under the Laws of: ID C 95459		6. Annual Report must be signed.* Signature: James Schwartz Name (type or print): James Schwartz					
		Date: 06/30/2009 Title: Owner - operator					
Processed 06/30/2009		* Electronically provided signatures are accepted as original signatures.					