

No. C 50497		Due no later than Dec 31, 2016		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		Annual Report Form 1. Mailing Address: Correct in this box if needed. KARL VAN BUREN FARM CO. DONALD VAN BUREN 512 TAMMANY CREEK ROAD LEWISTON ID 83501		DONALD K VAN BUREN 512 TAMMANY CREEK ROAD LEWISTON ID 83501		
				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
DIRECTOR	DAVID K VAN BUREN	446 SOUTHPORT AVENUE	LEWISTON	ID	USA	83501
DIRECTOR	BRUCE A VAN BUREN	93 SAGEBRUSH LANE	LEWISTON	ID	USA	83501
DIRECTOR	RONALD L VAN BUREN	89 SAGEBRUSH LANE	LEWISTON	ID	USA	83501
DIRECTOR	GERALD F VAN BUREN	618 TAMMANY CREEK ROAD	LEWISTON	ID	USA	83501
DIRECTOR	MILDRED A OLDEN	14416 S E 143RD PLACE	RENTON	WA	USA	98059
SECRETARY	BRUCE A VAN BUREN	93 SAGEBRUSH LANE	LEWISTON	ID	USA	83501
PRESIDENT	DONALD K VAN BUREN	512 TAMMANY CREEK ROAD	LEWISTON	ID	USA	83501
5. Organized Under the Laws of: ID C 50497		6. Annual Report must be signed.* Signature: David Van Buren Name (type or print): David Van Buren Date: 12/16/2016 Title: Director				
Processed 12/16/2016		* Electronically provided signatures are accepted as original signatures.				