## INSTRUCTIONS ON REVERSE SIDE

| lo. 647708 k   |            | Idaho Corpo   | Idaho Corporation Annual Report Form |            | 2. Registered Agent and Office             |                       |            |
|--|------------|---|--------------------------------------|------------|--|-----------------------|------------|
| Return To Secretary of State Room 203, Statehouse 87 July 20 77 8 52 |            | Due No Later Than November 1, 1987  1. Mailing Address — Please Correct 047703  BOWMAN PRODUCE: INC. GIGRAY: MILLER: DOWNER BOX 540 CALUMELL: IDAMO 83000 |                                      |            | GERALD L. WESTON  THE DEARBORN STREETENTER |                       |            |
|  |            |   |                                      |            | 3. Incorporated Under The Laws of          |                       | JUL 27     |
| 4. Names and Addresses   | of Officer |   |                                      |            |  | \$ \$ 1 pm \$ 1 % 2 . |            |
|  |            | Name  | Street or P.                         | O. Address | <u>City</u>                                | <u>State</u>          | <u>Zip</u> |
| President:   | Ralp       | h Bowman  | P.O. Box                             | 188        | Marsing                                    | ID                    | 83639      |
| Secretary:   |            | a Bowman  | P.O. Box                             | 188        | Marsing                                    | ID                    | 83639      |
| Directors:   |            | h Bowman  | P.O. Box                             | 188        | Marsing                                    | ID                    | 83639      |
|  |            | a Bowman  | P.O. Box                             | 188        | Marsing                                    | ID                    | 83639      |
|  | Gera       | ld Bowman   | P.O. Box                             | 188        | Marsing                                    | ID                    | 83639      |
|  |            |   |                                      |            |  |                       |            |
|  |            |   |                                      |            |  |                       | ÷          |
|  |            |   |                                      |            |  |                       |            |
|  |            |   |                                      |            |  |                       |            |

| 5. Nature of Business | 6. I certify that this Annutrue, correct and com |  |  |
|-----------------------|--|--|--|
| AGRICULTURE           | Signature Allead Name (Typed or Printed)         |  |  |
|                       | 5 816161616161616                                |  |  |

nual Report has been examined by me and is to the best of my knowledge nplete. BRITHARI <u> Laura Bowman</u>

## BOWMAN PRODUCE, INC.

PACKER AND SHIPPER ONIONS

SEC. OF

April 27, 1988

27, 1988 88 APR 28 AM **9** 1

Secretary of State
Room 203, Statehouse
Corporation Dept.
Boise, Idaho 83720

Re: Bowman Produce, Inc. License

Dear Sir:

In the past you have mailed our Annual Idaho C Report Form to our Attorney, Gerald Weston. W to change this and have it mailed directly to

In the Future, would you please send the Corpo Form to Bowman Produce, Inc., P.O. Box 188, Ma

Yours ve

Bowman P

Gerald I

10000900