

No. C 3873	<b>Annual Report Form</b> 1996 Due No Later Than November 30,		2. Registered Agent and Office <b>NOT A P.O. BOX</b>																								
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FEE REQUIRED</b>  <b>* FIRST NOTICE *</b>	<b>1. Mailing Address - Please Correct, If Not Correct</b>  ROXANA CANAL COMPANY DEAN ZOLLINGER ROUTE 2, BOX 72  REXBURG ID 83440		ROBERT W. ORME 1721 E 100 N  REXBURG ID 83440  <b>3. Organized Under the Laws of:</b>  ID C 3878																								
<b>4. Corporations: Enter Names and Addresses of President, Secretary and Directors</b> 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 563"> <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>Dean W Zollinger</td> <td>4915 N 2000 W</td> <td>Refring</td> <td>Ida</td> <td>83440</td> </tr> <tr> <td>Director</td> <td>Robert Orme</td> <td>1721 East 100 N</td> <td>Refring</td> <td>Ida</td> <td>83440</td> </tr> <tr> <td>Director</td> <td>Winston Larsen</td> <td>4590 N. Salem Rd.</td> <td>Refring</td> <td>Ida</td> <td>83440</td> </tr> </tbody> </table>				Office held	Name	Street or P.O. Address	City	State	Zip	President	Dean W Zollinger	4915 N 2000 W	Refring	Ida	83440	Director	Robert Orme	1721 East 100 N	Refring	Ida	83440	Director	Winston Larsen	4590 N. Salem Rd.	Refring	Ida	83440
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<b>5. NATURE OF BUSINESS</b>  IRRIGATION	<b>6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.</b> Signature <u>Dean W Zollinger</u> Date <u>8-3-96</u> Name (Typed or Printed) <u>Dean W. Zollinger</u> Title <u>Pres.</u>																										

ISSUED: 07-06-1996

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