

No. <b>C 70011</b>		<b>Due no later than Jun 30, 2014</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>Annual Report Form</b>  <b>1. Mailing Address: Correct in this box if needed.</b> LOST RIVERS FARM BUREAU, INC. TRAVIS B MCAFFEE P O BOX 824 ARCO ID 83213 USA		DAVID R CALLISTER 1454 W 3700 N HOWE ID 83244		
				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	MOJ BROADIE	3317 W 3700 N	MOORE	ID	USA	83255
SECRETARY	JACKIE STEWART	2700 N 3405 W	MOORE	ID	USA	83255
DIRECTOR	PAM KELLY	3668 W 3550 N	MOORE	ID	USA	83255
VICE PRESIDENT	MARCUS D KELLY	3668 W 3550 N	MOORE	ID	USA	83255
PRESIDENT	TRAVIS MCAFFEE	1293 W 3700 N	HOWE	ID	USA	83244
DIRECTOR	SHAWN ANDERSON	3650 N 3650 W	DARLINGTON	ID	USA	83255
DIRECTOR	AARON ROMRELL	1600 W 3651 N	HOWE	ID	USA	83244
DIRECTOR	DAVID R CALLISTER	1454 W 3700 N	HOWE	ID	USA	83244
5. Organized Under the Laws of:  <b>ID C 70011</b>		6. Annual Report must be signed.* Signature: Travis McAfee Name (type or print): Travis McAfee  Date: 06/29/2014 Title: President				
Processed 06/29/2014		* Electronically provided signatures are accepted as original signatures.				