No. C 52926		Due no later than Feb 29, 2016	2. Registered Agent and Address (NO PO BOX) DAVID ASCUENA 4020 S MAIN ST MOUNTAIN HOME ID 83647 3. New Registered Agent Signature:*			
Return to:		Annual Report Form				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. ELMORE COUNTY FARM BUREAU, INC. PAUL SHRUM BOX 673 MOUNTAIN HOME ID 83647				
NO FILING FEE IF RECEIVED BY DUE DATE						
4. Corporations: Enter	Names and Busin	ess Addresses of President, Secretary, and Directors. Treasurer	(optional).			
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
PRESIDENT PAUL SHRUM		M 4114 CANYON CREEK RD	MOUNTAIN HOM	E ID	USA	83647
5. Organized Under the Laws of:		6. Annual Report must be signed.*				
ID		Signature: Alicia M Silva	Date: 01/19/2016			
C 52926		Name (type or print): Alicia M Silva	Title: Secretary			
Processed 01/19/2016 * Electronically provided signatures are accepted as original signatures.						