

No. W 38688	Due no later than April 30, 2006 Annual Report Form		2. Registered Agent and Office 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	1. Mailing Address - Correct in this box, if applicable		JOSEPH OLER 505 SUGAR AVE SHELLEY, ID 83274													
	M. OLER FARMS LLC 505 SUGAR AVE SHELLEY, ID 83274															
3. <u>New</u> Registered Agent Signature																
4. Limited Liability Companies: Enter Names and Addresses of Managers. <table border="0"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>member of partnership</td> <td>Joseph Oler</td> <td>505 Sugar Ave</td> <td>Shelley</td> <td>Id.</td> <td>83274</td> </tr> </tbody> </table>					<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	member of partnership	Joseph Oler	505 Sugar Ave	Shelley	Id.	83274
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>											
member of partnership	Joseph Oler	505 Sugar Ave	Shelley	Id.	83274											
5. Organized Under the Laws of: IDAHO W 38688		6. Signature <u>Joseph m. Oler</u> Date <u>2-27-06</u> Name (Typed or Printed) <u>Joseph m. Oler</u> Title <u>member of partnership</u>														