

|                                                                                                                                                        |              |                                                                                                                                              |            |                                                    |         |                   |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|----------------------------------------------------------------------------------------------------------------------------------------------|------------|----------------------------------------------------|---------|-------------------|--|
| No. <b>C 79153</b>                                                                                                                                     |              | <b>Due no later than Jul 31, 2013</b>                                                                                                        |            | 2. Registered Agent and Address <b>(NO PO BOX)</b> |         |                   |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |              | <b>1. Mailing Address: Correct in this box if needed.</b><br><br>REED GRAIN & BEAN CO., INC.<br>EARL W REED<br>P.O. BOX 472<br>BUHL ID 83316 |            | EARL W. REED<br>903 ELM<br>BUHL ID 83316           |         |                   |  |
|                                                                                                                                                        |              |                                                                                                                                              |            | 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       |  |
| SECRETARY                                                                                                                                              | CAROL O REED | 4154 N MEADOWRIDGE CR                                                                                                                        | TWIN FALLS | ID                                                 | USA     | 83301             |  |
| PRESIDENT                                                                                                                                              | EARL W REED  | 4154 N MEADOW RIDGE CR.                                                                                                                      | TWIN FALLS | ID                                                 | USA     | 83301             |  |
| 5. Organized Under the Laws of:                                                                                                                        |              | 6. Annual Report must be signed.*                                                                                                            |            |                                                    |         |                   |  |
| <b>ID<br/>C 79153</b>                                                                                                                                  |              | Signature: Douglas Beames                                                                                                                    |            |                                                    |         | Date: 05/20/2013  |  |
|                                                                                                                                                        |              | Name (type or print): Douglas Beames                                                                                                         |            |                                                    |         | Title: Controller |  |
| Processed 05/20/2013                                                                                                                                   |              | * Electronically provided signatures are accepted as original signatures.                                                                    |            |                                                    |         |                   |  |