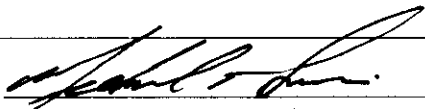
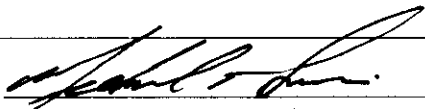
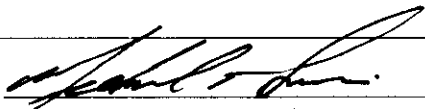


<b>No. W 2753</b>	<b>Due no later than August 31, 2003</b> <b>Annual Report Form</b>	2. Registered Agent and Office <b>NO PO BOX</b>  MICHAEL T LEWIS 1627 S 2350 E  MALTA, ID 83342
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	1. Mailing Address - Correct in this box, if applicable DELTA FARMS, LLC MICHAEL T LEWIS #2 JANE LN BOX 631 1627 S 2350 E MALTA, ID 83342	3. <u>New</u> Registered Agent Signature

4. Limited Liability Companies: Enter Names and Addresses of Managers.
 

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
manager	Michael T Lewis	1627 S 2350 E	MALTA	ID	83342
member	Rodney N Hall	1627 S 2350 E	MALTA	ID	83342
member	D. Jane Hall	1627 S 2350 E	MALTA	ID	83342

5. Organized Under the Laws of:  IDAHO W 2753	6. <table style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <tr> <td style="width: 50%;">Signature </td> <td style="width: 50%;">Date <u>June 16/03</u></td> </tr> <tr> <td>Name (Type or Printed) <u>Michael T Lewis</u></td> <td>Title <u>MANAGER</u></td> </tr> </table>	Signature 	Date <u>June 16/03</u>	Name (Type or Printed) <u>Michael T Lewis</u>	Title <u>MANAGER</u>
Signature 	Date <u>June 16/03</u>				
Name (Type or Printed) <u>Michael T Lewis</u>	Title <u>MANAGER</u>				