

PETE T. CENARRUSA  
SECRETARY OF STATE

BEN YSURA  
CHIEF DEPUTY  
SECRETARY OF STATE

700 West Jefferson  
PO Box 83720  
Boise, Idaho 83720-0080  
Telephone 208 334-2300  
Facsimile 208 334-2282  
e-mail: sosinfo@idsos.state.id.us  
<http://www.idsos.state.id.us>



STATE OF IDAHO  
SECRETARY OF STATE

July 21, 1998

Corporations Division  
208 334-2301  
Uniform Commercial Code Division  
208 334-3191  
Facsimile 334-2847  
Trademarks/Notaries Division  
208 334-2300  
Elections Division  
208 334-2852  
Legislative and Executive Affairs  
208 334-2300  
Fiscal Division  
208 334-5355  
Computer Services  
208 334-5354

Don Allen Knopp  
Ag-West Distributing Company C88743  
Box 1144  
Burley ID 83318

**COPY**

RE: Ag-West Distributing Company C88743

Greetings:

Please find enclosed your recently submitted annual report for the 1998-1999 fiscal year. We are unable to accept it in its present form. Please make the following correction(s) and return to this office.

The annual report must be signed by an authorized individual appointed by the corporation.

If You have any questions or need further assistance, please do not hesitate to contact this office at (208) 334-2301.

Very truly yours,

Sheryl DeVries  
Corporate Division

Enclosures: cited

Due No Later Than November 30,

Return to:  
SECRETARY OF STATE  
700 WEST JEFFERSON  
PO BOX 83720  
BOISE, ID 83720-0080

NO FEE REQUIRED

\* FIRST NOTICE \*

## 1. Mailing Address - Please Correct, If Not Correct

AG-WEST DISTRIBUTING COMPANY  
DON ALLEN KNOPP  
199 W 2ND ST N  
PO BOX 1144  
BURLEY ID 83318

DON ALLEN KNOPP  
199 W 2ND ST N

BURLEY ID 83318

## 3. Organized Under the Laws of:

ID C 88743

4. Corporations: Enter Names and Business Addresses of **President, Secretary and Directors**  
Limited Liability Companies: Enter Names and Addresses of ☐ **Managers** or ☐ **Members** (check one)

Office held	Name	Street or P.O. Address	City	State	Zip
President	Don Knopp	P.O. Box 1144	Burley, ID		83318
Sec/Tres.	Mike Nelson	P.O. Box 1144	Burley, ID		83318

## 5. Signature of New Registered Agent

6.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Name (Typed or Printed) \_\_\_\_\_ Title \_\_\_\_\_

ISSUED: 07-03-1998

4815

DO NOT TAPE OR STAPLE