110.			Due no later than April 30, 2007 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 4. Corporations: Enter Name		1. Mailing Address Correct in this box, if applicable FARMERS CO-OPERATIVE DITCH COMPANY JERRODISTIONE Sheila Seeman P. O. BOXXXX 729 PARMA, ID 83660 es and Business Addresses of President, Secretary			XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX			
Office held President Vice-Pres. Secty-Treas Director Director Director Director	Name Rod Nielse William Ha Sheila See Tom Johnst Kenneth Ne Mike Nicho	en rtman eman con elson els	Street or 30364 23854 P. O. 22410 33493 29500 23460	P.O. Address Pearl Rd. Ten Davis Rd. Box 729 Ten Davis Rd. Hwy 95 Hurtz Rd. Stafford Rd.	City Parm Parm Parm Parm Parm Parm Parm Parm	12 12 13 14 14 15 16 16	State ID	21p 83660 83660 83660 83660 83660 83660 83660
	or the Laws of: DAHO 1430			eture Sheile x		De North	ite 4/	120/07 ty-Sees.