

|                                                                                                                                                        |                  |                                                                                                                                                         |           |                                                       |         |                  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-------------------------------------------------------|---------|------------------|--|
| No. <b>C 128959</b>                                                                                                                                    |                  | <b>Due no later than May 31, 2014</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>LINDSAY LATERAL DITCH COMPANY<br>LYLE F LAMPRECHT<br>925 W 100 N<br>BLACKFOOT ID 83221 |           | LYLE F LAMPRECHT<br>925 W 100 N<br>BLACKFOOT ID 83221 |         |                  |  |
|                                                                                                                                                        |                  |                                                                                                                                                         |           | 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                                                                                                                                              | LYLE F LAMPRECHT | 925 W 100 N                                                                                                                                             | BLACKFOOT | ID                                                    | USA     | 83221            |  |
| PRESIDENT                                                                                                                                              | ALAN PARKS       | 86 N 900 W                                                                                                                                              | BLACKFOOT | ID                                                    | USA     | 83221            |  |
| 5. Organized Under the Laws of:                                                                                                                        |                  | 6. Annual Report must be signed.*                                                                                                                       |           |                                                       |         |                  |  |
| <b>ID<br/>C 128959</b>                                                                                                                                 |                  | Signature: Lyle Lamprecht                                                                                                                               |           |                                                       |         | Date: 04/29/2014 |  |
|                                                                                                                                                        |                  | Name (type or print): Lyle Lamprecht                                                                                                                    |           |                                                       |         | Title: Secretary |  |
| Processed 04/29/2014                                                                                                                                   |                  | * Electronically provided signatures are accepted as original signatures.                                                                               |           |                                                       |         |                  |  |