

REINSTATEMENT FILED EFFECTIVE

No. L 1817 Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 FEE DUE \$30.00	Annual Report Form ADMIN TERMINATED 07/06/2007 1. Mailing Address - Correct in this box, if applicable CRAIG W. HUBBARD FARMS, A LIMITED P DEON W HUBBARD 345 Hubbard RD. NOT BOX 234 BONNERS FERRY, ID MOORE SPRING, ID 83845 83805	2. Registered Agent and Office NOT A P.O. BOX CRAIG W HUBBARD HUBBARD 345 Hubbard RD BONNERS FERRY, ID 83805 3. <u>New</u> registered agent signature																		
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of management. Limited and Limited Liability Partnerships: Enter names and addresses of at least two (2) partners. <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Office held</th> <th style="text-align: left;">Name</th> <th style="text-align: left;">Street or P.O. Address</th> <th style="text-align: left;">City</th> <th style="text-align: left;">State</th> <th style="text-align: left;">Zip</th> </tr> </thead> <tbody> <tr> <td>Partner</td> <td>Craig W Hubbard</td> <td>345 Hubbard RD</td> <td>BONNERS FERRY</td> <td>ID</td> <td>83805</td> </tr> <tr> <td>Partner</td> <td>Carol Jean Hubbard</td> <td>345 Hubbard RD</td> <td>BONNERS FERRY</td> <td>ID</td> <td>83805</td> </tr> </tbody> </table>			Office held	Name	Street or P.O. Address	City	State	Zip	Partner	Craig W Hubbard	345 Hubbard RD	BONNERS FERRY	ID	83805	Partner	Carol Jean Hubbard	345 Hubbard RD	BONNERS FERRY	ID	83805
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Partner	Carol Jean Hubbard	345 Hubbard RD	BONNERS FERRY	ID	83805															
5. Organized under the laws of: IDAHO L 1817	6. Signature <u>Craig W Hubbard</u> Date <u>1/26/09</u> Name (Typed or Printed) <u>Craig W Hubbard</u> Title <u>Partner</u>																			

Issued 1/16/2009 by KAH