



(7) Type/Print Name:

## **Idaho Corporation Annual Report Form**

File online at: sos.idaho.gov Due no later than: 04/30/2019 Return completed form within 30 days tool Idaho Secretary of State
Attn: Annual Reports
450 North 4th Street

Annual Report: No filing fee	if received by the due date.	Boise, ID 83720
		Phone: (208) 334-2300
SOS Control Number: 210312	Filing Status: Active-Good Sta	anding
Foreign Business Corporation	Date Formed:	Formation Locale: DELAWARE
Name and Mailing Address: TRIPPLE FARMS, INC.	(1)	Add or Change Malling Address:
5710 HOWARD LANE		
NAMPA, ID 83687		
Registered Agent (RA) and Register	ed Office (RO) Address: (2)	Change RA and/or RO Address:
N T TRIPPLE		
5710 HOWARD LANE		
NAMPA, ID 83687		
Note: The Rea	istered Office address must be a physical ld	daho address (no postal box)
/A) \$1		The poolal ways
(3) New Registered Agent (RA) Signa		
	<del></del>	above, the new agent must sign here to accept the appointmen
(4) Corporations: Enter names and business ad		
Title Name	Business Address	City, State, Zip
Secretary Marilyn . 1		Lane Nampa, 7d 8368
President Norvin T. J	riple 5710 Howard	Lane Mampa, Id 8368
(5) Board of Directors names and business add	resses (with zip code). Attach additional sheet	if necessary.
Name	Business Address	City, State, Zip
Same as the above	2	
and an are another		
(5) Signature: M. Tripp	(6) I	Dale: 5/08/19

(8) Title:

Instructions: Legibly complete the form above. Sign and date this form and return to the address provided above.