

| No. W 38833 | Due no later than April 30, 2008 | | 2. Registered Agent and Office NO PO BOX | | | | | | | | | | | | | |
|---|----------------------------------|---|--|--|-------------|------|------------------------|------|-------|-----|---------|-----------------|-----------|---------|----|-------|
| Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE | | Annual Report Form 1. Mailing Address - Correct in this box, if applicable MARY'S FEED & FARM, LLC 522 HWY 2 OLDTOWN, ID 83822 | | NICK M LAMANNA 102 N 9TH ST PRIEST RIVER, ID 83856 | | | | | | | | | | | | |
| | | | | 3. New Registered Agent Signature | | | | | | | | | | | | |
| 4. Limited Liability Companies: Enter Names and Addresses of Managers. <table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>manager</td> <td>Mary E. O'Neill</td> <td>522 Hwy 2</td> <td>Oldtown</td> <td>Id</td> <td>83822</td> </tr> </tbody> </table> | | | | | Office held | Name | Street or P.O. Address | City | State | Zip | manager | Mary E. O'Neill | 522 Hwy 2 | Oldtown | Id | 83822 |
| Office held | Name | Street or P.O. Address | City | State | Zip | | | | | | | | | | | |
| manager | Mary E. O'Neill | 522 Hwy 2 | Oldtown | Id | 83822 | | | | | | | | | | | |
| 5. Organized Under the Laws of: IDAHO W 38833 | | 6. Signature <u>Mary E O'Neill</u> Date <u>4-25-08</u> Name (Typed or Printed) <u>Mary E. O'Neill</u> Title <u>owner</u> | | | | | | | | | | | | | | |

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