

|  |                  |   |           |   |         |             |
|--|------------------|---|-----------|---|---------|-------------|
| No. <b>C 20837</b>   |                  | Due no later than Apr 30, 2016<br><b>Annual Report Form</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>PIONEER IRRIGATION & MANUFACTURING COMPANY, INC.<br>DAVID MATTHEWS<br>P.O. BOX 222<br>PARIS ID 83261 |           | DAVID MATTHEWS<br>89 WEST 2 SOUTH<br>PARIS ID 83261 |         |             |
|  |                  |   |           | 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 |
| DIRECTOR   | DAVID H MATTHEWS | 89 W 2 S  | PARIS     | ID  | USA     | 83261       |
| TREASURER  | DAVID H MATTHEWS | 89 WEST 2ND SOUTH   | PARIS     | ID  | USA     | 83261       |
| SECRETARY  | DAVID H MATTHEWS | 89 WEST 2ND SOUTH   | PARIS     | ID  | USA     | 83261       |
| DIRECTOR   | ERIC MATTSO      | 161 SOUTH 2ND EAST  | PARIS     | ID  | USA     | 83261       |
| DIRECTOR   | DAVID SLEIGHT    | 1603 SUN VALLEY WAY   | POCATELLO | ID  | USA     | 83201       |
| PRESIDENT  | BRENT LEWIS      | 160 NORTH 1ST WEST  | PARIS     | ID  | USA     | 83261       |
| DIRECTOR   | BRENT LEWIS      | 160 N 1 W   | PARIS     | ID  | USA     | 83261       |
| DIRECTOR   | DAVID BLACK      | 205 N 100 E   | BOUNTIFUL | UT  | USA     | 84010       |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>C 20837</b>   |                  | 6. Annual Report must be signed.*<br>Signature: David H Matthews<br>Name (type or print): David H Matthews  |           |   |         |             |
|  |                  | Date: 04/29/2016<br>Title: Secretary/Treasurer  |           |   |         |             |
| Processed 04/29/2016   |                  | * Electronically provided signatures are accepted as original signatures.   |           |   |         |             |