No. <b>C 59535</b>		Due no later than Oct 31, 2014		2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			JAMES WHITTAKER			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  LEMHI COUNTY FARM BUREAU, INC.  JAMES WHITTAKER  112 CENTER STREET  SALMON ID 83467		SALMON II	112 CENTER ST SALMON ID 83467  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		USA		3	<b>J</b>	J		
4. Corporations: Enter Na	mes and Busin	ess Addresses of Pres	ident, Secretary, and Directors. Treas	surer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	JAMES WHITTAKER		PO BOX 240	LEADORE	ID	USA	83464	
DIRECTOR	WES MACKEKY		PO BOX 82	LEMHI	ID	USA	83465	
DIRECTOR	CTOR BRYANT BEYELER		52F COTTOM LANE	LEADORE	ID	USA	83464	
DIRECTOR	CTOR STEVEN JOHNSON		1019 LEE CREEK RD	LEADORE	ID	USA	83464	
DIRECTOR HARLEY WALLIS		LLIS	2057 PAHSIMEROI RD	MAY	ID	USA	83253	
DIRECTOR	PAUL FISHER	₹	11 MASONS WAY	SALMON	ID	USA	83467	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: James Whittaker			Date: 08/18/2014			
C 59535		Name (type or print): James Whittaker			Title: President			
Processed 08/18/2014 * Electronically provided signatures are accepted as original signatures.								