| No. C 59843 | | Due no later than Dec 31, 2012 Annual Report Form 1. Mailing Address: Correct in this box if needed. BENEWAH COUNTY FARM BUREAU, INC. DEL RUST 412 MAIN AVE. ST. MARIES ID 83861-2059 | | 2. Registered Age | 2. Registered Agent and Address (NO PO BOX) DEL RUST | | | | | | | | | | |
|----------------------------------------------------------------------------------------------------------------------------|------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|-----------------------------------------------------------------------|-------------------------------------------------------|-----|-------|-----------------------|--------------------|--------------------|--------------------------------------------|-----------------|-------|---------|-------------|
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE | | | | | | | | | | | | | | | |
| | | | | 412 MAIN AVE ST. MARIES ID 83861 3. New Registered Agent Signature:* | | | | | | | | | | | |
| | | | | | | | | 4. Corporations: Ente | er Names and Busin | ess Addresses of P | resident, Secretary, and Directors. Treasu | rer (optional). | | | |
| | | | | | | | | Office Held | Name | | Street or PO Address | City | State | Country | Postal Code |
| DIRECTOR | BRENDA STE | EINEBACH | C/O 2071 HELLS GULCH RD | SAINT MARIES | ID | USA | 83861 | | | | | | | | |
| DIRECTOR | KAREN CALI | STERIO | MOSES MOUNTAIN ROAD | TENSED | ID | USA | 83870 | | | | | | | | |
| DIRECTOR | KEN DEVRIE | S | 333 LOST TRAIL | SAINT MARIES | ID | USA | 83861 | | | | | | | | |
| DIRECTOR | ALICE LEAVITT | | PO BOX 307 | FERNWOOD | ID | USA | 83861 | | | | | | | | |
| SECRETARY | CAROLE RUST | | 508 RAILROAD AVENUE | SAINT MARIES | ID | USA | 83861 | | | | | | | | |
| DIRECTOR | COLIN LONGWORTH | | 1685 GOOSEHAVEN RD | SAINT MARIES | ID | USA | 83861 | | | | | | | | |
| DIRECTOR | J. RUSSELL LOWRY | | 270 LOWRY LANE | PLUMMER | ID | USA | 83851 | | | | | | | | |
| DIRECTOR | JOHN FERRIS | | 7569 WINDFALL PASS RD | SAINT MARIES | ID | USA | 83861 | | | | | | | | |
| DIRECTOR | KEITH DAMAN | | 1828 SHEEP CREEK RD | DESMET | ID | USA | 83824 | | | | | | | | |
| PRESIDENT | DEL RUST | | 508 RAILROAD AVENUE | SAINT MARIES | ID | USA | 83861 | | | | | | | | |
| DIRECTOR | BUD STEINE | BACH | 2071 HELLS GULCH RD | SAINT MARIES | ID | USA | 83861 | | | | | | | | |
| 5. Organized Under t | the Laws of: | 6. Annual Report | must be signed.* | | | | | | | | | | | | |
| ID S | | Signature: Susi | Signature: Susie Patterson | | Date: 12/13/2012 | | | | | | | | | | |
| C 59843 | | Name (type or print): Susie Patterson | | | Title: Csr | | | | | | | | | | |
| Processed 12/13/201 | 2 | * Electronically pro | ovided signatures are accepted as original | signatures. | | | | | | | | | | | |