No. C 79939	Due no later than Nov 30, 2001 Annual Report Form 1. Mailing Address - Correct in this box, if applicable and the second secon	2. Registered Agent and Office NO PO BOX LON MERRIFIELD ROUTE 1, BOX 509
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	1 Mailing Address Context CLIFTY VIEW NURSERY, INC. LON MERRIFIELD ROUTE 1, BOX 509 BONNERS FERRY, ID 83805	BONNERS FERRY, ID 83805 3. New Registered Agent Signature
NO FILING FEE IF RECEIVED BY DUE DATE		Secretary and Directors.
Office held Name President Lon Me V President Steve Treasurer Donna	koppang Rt 1 Box 505 E	City State Zip Conners Ferry ID 83805 Conners Ferry, ID 83805 Conners Ferry, ID 83805 Conners Ferry, ID 83805 Conners Ferry, ID 83864
5. Organized Under the Laws of: IDAHO	Signature Name (Typed or Steve Kopp)	Date Sept 17, 2001 ang Title V President
C 79939	Name (Typed or Steve Kopp)	2880