

November 4, 1996

BARRY WILLIAMS  
1277 MINK CR RD  
ARBON VALLEY ID 83212

RE: IDAHO SIMMENTAL ASSOCIATION C 45199

Dear Barry:

Please find enclosed your recently submitted annual report for the 1996-1997 fiscal year. We are unable to accept it in its present form. Please make the following correction(s) and return to this office.

Please be certain to correct the mailing address in block 1 so that you will receive the annual report next year.

Also, we noted a problem with the registered agent in block 2.

Pursuant to section 30-1-12, Idaho Code, each Idaho corporation must have and continuously maintain a registered agent/office in this state. Since the purpose of the registered office is to name a location for service of process, a street address or rural route is required. If an annual report is not filed in this office by December 3, 1996, the corporation will forfeit its right to do business in Idaho.

If you have any questions or need further assistance, please do not hesitate to contact this office at (208) 332-2811.

Very truly yours,

*Sheryl DeVries*

Sheryl DeVries

No. C 45199	<b>Annual Report Form</b> 1996 Due No Later Than November 30,		2. Registered Agent and Office <b>NOT A P.O. BOX</b>
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FEE REQUIRED</b>  <b>** FINAL NOTICE **</b>	1. Mailing Address - Please Correct, If Not Correct IDAHO SIMMENTAL ASSOCIATION, <del>BOB LANTING</del> 2181 B N 2300 E  TWIN FALLS ID 83301		<del>BOB LANTING</del> ROUTE 1, 2181 B.N. 2300  TWIN FALLS ID 83301
			3. Organized Under the Laws of: ID C 45199

4. Corporations: Enter Names and Addresses of **President, Secretary and Directors**  
 Limited Liability Companies: Enter Names and Addresses of ☐ **Managers** or ☐ **Members** (check one)

Office held	Name	Street or P.O. Address	City	State	Zip
Pres.	Barry Williams	1277 Mink Cr. Rd.	Arbon Valley	ID	83212
Vice Pres.	Robert Henry	204 S. 875 E	Jerome	ID	83338
Secretary	Carol Waller		Filer	ID	83328

5. NATURE OF BUSINESS  PROMOTE SIMMENTAL CATTLE	6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. Signature <u>Chela Lanting</u> Date <u>Oct. 10 '96</u> Name (Typed or Printed) _____ Title _____
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ISSUED: 10-05-1996

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↓ DO NOT TAPE OR STAPLE ↓