

No. C 72255	<b>Annual Report Form</b> Due No Later Than November 30, 1996	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>  * FIRST NOTICE *	1. Mailing Address - Please Correct, If Not Correct  C & T OAKLEY RANCH, INC. CLIFFORD L. SMITH 159 W HWY 30  BURLEY ID 83318	CLIFFORD L. SMITH 159 W HWY 30  BURLEY ID 83318  3. Organized Under the Laws of:  ID C 72255																								
4. Corporations: Enter Names and Addresses of <b>President, Secretary and Directors</b> Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> <b>Managers</b> or <input type="checkbox"/> <b>Members</b> (check one)																										
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;">Office held</th> <th style="width: 20%;">Name</th> <th style="width: 30%;">Street or P.O. Address</th> <th style="width: 15%;">City</th> <th style="width: 10%;">State</th> <th style="width: 15%;">Zip</th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Clifford L Smith</td> <td>932 River DR</td> <td>Heyburn</td> <td>ID</td> <td>83386</td> </tr> <tr> <td>Secretary</td> <td>SARAGENE SMITH</td> <td>" " "</td> <td>"</td> <td>"</td> <td>"</td> </tr> <tr> <td>Director</td> <td>Todd Smith</td> <td>945 River DR</td> <td>"</td> <td>"</td> <td>"</td> </tr> </tbody> </table>			Office held	Name	Street or P.O. Address	City	State	Zip	President	Clifford L Smith	932 River DR	Heyburn	ID	83386	Secretary	SARAGENE SMITH	" " "	"	"	"	Director	Todd Smith	945 River DR	"	"	"
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5. NATURE OF BUSINESS  <del>FARMING</del> <b>TRUCKING</b>	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><i>Clifford L Smith</i></u> Date <u>9/10/96</u> Name (Typed or Printed) <u>Clifford Smith</u> Title <u>President</u>																									

ISSUED: 07-06-1995

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