No. C 161040		Due no later than Jun 30, 2006	Registered Agent and Address (NO PO BOX) JON S WILKES AND PO BOX AND PO BOX AND PO BOX AND PO BOX BOX BOX BOX BOX BOX BOX BOX			
Return to:		Annual Report Form				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.	412 N MAIN ST BELLEVUE ID 83313			
		BRANCHING OUT NURSERY, INC. JON S WILKES PO BOX 426				
		BELLEVUE ID 83313	3. <u>New</u> Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE						
4. Corporations: Enter Na	mes and Busii	ness Addresses of President, Secretary, and Directors. Treasurer	(optional).			
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
PRESIDENT	JON S WIL	KES P.O. BOX 426	BELLEVUE	ID	USA	83313
SECRETARY	SOFIE WILI	KES P.O. BOX 426	BELLEVUE	ID	USA	83313
DIRECTOR	JON S WIL	KES P.O. BOX 426	BELLEVUE	ID	USA	83313
DIRECTOR	SOFIE WILI	KES P.O. BOX 426	BELLEVUE	ID	USA	83313
5. Organized Under the Laws of:		6. Annual Report must be signed.*				
IDAHO C 161040		Signature: JON WILKES	Date: 07/12/2006			
		Name (type or print): JON WILKES	Title: PRESIDENT			
Processed 07/12/2006		* Electronically provided signatures are accepted as original signatures.				