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| No. <b>C129379</b>                                                                                                                                                                                                                                            | <b>Annual Report Form</b> <b>1999</b><br><i>Due No Later Than November 30,</i>                                                                       |                                                                                                                                                   | 2. Registered Agent and Office <b>NOT A P.O. BOX</b><br><br><b>DR. MICHAEL D. LEWIS</b><br><b>3657 N 3000 E</b><br><br><b>TWIN FALLS ID 83301</b> |                         |
| Return to:<br><b>SECRETARY OF STATE</b><br><b>700 WEST JEFFERSON</b><br><b>PO BOX 83720</b><br><b>BOISE, ID 83720-0080</b><br><br><b>NO FEE REQUIRED</b>                                                                                                      | 1. Mailing Address - Please Correct If Not Correct<br><br><b>AGRICULTURAL INFORMATION RES</b><br><b>DR. MICHAEL D. LEWIS</b><br><b>3657 N 3000 E</b> |                                                                                                                                                   | 3. Organized Under the Laws of:<br><br><b>ID</b> <b>C129379</b>                                                                                   |                         |
| <b>* FIRST NOTICE *</b> <b>TWIN FALLS ID 83301</b>                                                                                                                                                                                                            |                                                                                                                                                      |                                                                                                                                                   |                                                                                                                                                   |                         |
| 4. Corporations: Enter Names and Business Addresses of <b>President, Secretary and Directors</b><br>Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> <b>Managers</b> or <input type="checkbox"/> <b>Members</b> (check one) |                                                                                                                                                      |                                                                                                                                                   |                                                                                                                                                   |                         |
| <u>Office held</u>                                                                                                                                                                                                                                            | <u>Name</u>                                                                                                                                          | <u>Street or P.O. Address</u>                                                                                                                     | <u>City</u>                                                                                                                                       | <u>State</u> <u>Zip</u> |
| Pres                                                                                                                                                                                                                                                          | Michael D. Lewis                                                                                                                                     | 3657 N. 3000 E.                                                                                                                                   | Twin Falls ID                                                                                                                                     | 83301                   |
| U.P./secr.                                                                                                                                                                                                                                                    | Roger C. Brook                                                                                                                                       | 523 Oakdale Dr.                                                                                                                                   | Naslett, MI                                                                                                                                       | 48840                   |
| Director                                                                                                                                                                                                                                                      | Rita J. Lewis                                                                                                                                        | 3657 N. 3000 E.                                                                                                                                   | Twin Falls ID                                                                                                                                     | 83301                   |
| Director                                                                                                                                                                                                                                                      | Patricia Brook                                                                                                                                       | 523 Oakdale Dr.                                                                                                                                   | Naslett, MI                                                                                                                                       | 48840                   |
| 5. Signature of New Registered Agent                                                                                                                                                                                                                          |                                                                                                                                                      | 6. Signature <u>Dr. Michael D. Lewis</u> Date <u>7-20-99</u><br>Name <small>(Typed or Printed)</small> <u>Michael D. Lewis</u> Title <u>Pres.</u> |                                                                                                                                                   |                         |

ISSUED: 07-03-1999

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