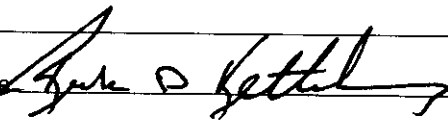


No. W 11507	Due no later than March 31, 2006		2. Registered Agent and Office NO PO BOX																			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	Annual Report Form		RICK D KETTERLING																			
	1. Mailing Address - Correct in this box, if applicable GOLDEN WEST PRODUCE, LLC. PO BOX 456 PARMA, ID 83660		25379 BURDEN RD PARMA, ID 83660 3. <u>New</u> Registered Agent Signature																			
4. Limited Liability Companies: Enter Names and Addresses of Members. <table border="1"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>Member</td> <td>RICK D Ketterling</td> <td>25379 Burden RD</td> <td>Parma</td> <td>ED</td> <td>83660</td> </tr> <tr> <td>Member</td> <td>DAN D SENSEL</td> <td>PO Box 606</td> <td>S</td> <td>S</td> <td>S</td> </tr> </tbody> </table>					<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	Member	RICK D Ketterling	25379 Burden RD	Parma	ED	83660	Member	DAN D SENSEL	PO Box 606	S	S	S
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>																	
Member	RICK D Ketterling	25379 Burden RD	Parma	ED	83660																	
Member	DAN D SENSEL	PO Box 606	S	S	S																	
5. Organized Under the Laws of: IDAHO W 11507		6. Signature  Date _____ Name (Typed or Printed) _____ Title _____																				

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