

No. 029217 Return To Secretary of State Room 203, Statehouse Boise, ID 83720	Idaho Corporation Annual Report Form Due No Later Than November 1, 1987 1. Mailing Address — Please Correct 029217 GRAIN PRODUCERS ASSN IDAHO XXXXXXXXXXXXXXXXXXXX TIM MCGREEVY ONYHEE PLAZA, SUITE X 230 BOISE, IDAHO 83702 <div style="text-align: right; margin-top: 10px;"> <i>letter re: name change sent.</i> </div>	2. Registered Agent and Office TIM MCGREEVY ONYHEE PLAZA, SUITE X 230 BOISE, ID 83702 3. Incorporated Under The Laws of STATE OF IDAHO																								
4. Names and Addresses of Officers and Directors <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;"></th> <th style="width: 25%; text-align: center;"><u>Name</u></th> <th style="width: 30%; text-align: center;"><u>Street or P.O. Address</u></th> <th style="width: 15%; text-align: center;"><u>City</u></th> <th style="width: 10%; text-align: center;"><u>State</u></th> <th style="width: 5%; text-align: center;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President:</td> <td>Tom Iverson</td> <td>HCR 61, Box 129</td> <td>Bonnors Ferry</td> <td>ID</td> <td>83805</td> </tr> <tr> <td>Secretary:</td> <td>Ken Hart</td> <td>3110 Lolo Creek RD</td> <td>Weippe,</td> <td>ID</td> <td>83553</td> </tr> <tr> <td>Director V.P.</td> <td>Glenn Blatter,</td> <td>3240 Molen St</td> <td>Idaho Falls,</td> <td>ID</td> <td>83401</td> </tr> </tbody> </table>				<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President:	Tom Iverson	HCR 61, Box 129	Bonnors Ferry	ID	83805	Secretary:	Ken Hart	3110 Lolo Creek RD	Weippe,	ID	83553	Director V.P.	Glenn Blatter,	3240 Molen St	Idaho Falls,	ID	83401
	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>																					
President:	Tom Iverson	HCR 61, Box 129	Bonnors Ferry	ID	83805																					
Secretary:	Ken Hart	3110 Lolo Creek RD	Weippe,	ID	83553																					
Director V.P.	Glenn Blatter,	3240 Molen St	Idaho Falls,	ID	83401																					
5. Nature of Business IDAHO GRAIN PRODUCERS ASSN. PROFESSIONAL ASSN.	6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"> Signature <i>Timothy D. McGreevy</i> Name (Typed or Printed) TIMOTHY D. MCGREEVY </td> <td style="width: 40%;"> Date 7/1/87 Title EXECUTIVE DIRECTOR </td> </tr> </table>		Signature <i>Timothy D. McGreevy</i> Name (Typed or Printed) TIMOTHY D. MCGREEVY	Date 7/1/87 Title EXECUTIVE DIRECTOR																						
Signature <i>Timothy D. McGreevy</i> Name (Typed or Printed) TIMOTHY D. MCGREEVY	Date 7/1/87 Title EXECUTIVE DIRECTOR																									

ENTERED
7/1/87