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|--------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|------------------------------------------------------------|---------|-------------|--|
| No. <b>C 90681</b>                                                                                                                                     |                     | Due no later than Nov 30, 2017                                                                                                                                                             |       | 2. Registered Agent and Address <b>(NO PO BOX)</b>         |         |             |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                     | <b>1. Mailing Address: Correct in this box if needed.</b><br><br>FIVE STAR LAND & CATTLE CO., INC.<br>ARLINE S. THOMAS-BOWEN<br>P.O. BOX 525<br>149 WEST BIRCH CREEK RD.<br>RIRIE ID 83443 |       | ARLINE S. THOMAS<br>149 W BIRCH CREEK RD<br>RIRIE ID 83443 |         |             |  |
|                                                                                                                                                        |                     |                                                                                                                                                                                            |       | 3. <u>New</u> Registered Agent Signature:*                 |         |             |  |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).                                      |                     |                                                                                                                                                                                            |       |                                                            |         |             |  |
| Office Held                                                                                                                                            | Name                | Street or PO Address                                                                                                                                                                       | City  | State                                                      | Country | Postal Code |  |
| VICE PRESIDENT                                                                                                                                         | RONALD MARK BLAKELY | 5717 N.107TH ST                                                                                                                                                                            | OMAHA | NE                                                         | USA     | 68134       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>C 90681</b>                                                                                           |                     | 6. Annual Report must be signed.*<br>Signature: Arline Bowen<br>Name (type or print): Arline Bowen<br>Date: 09/21/2017<br>Title: President                                                 |       |                                                            |         |             |  |
| Processed 09/21/2017                                                                                                                                   |                     | * Electronically provided signatures are accepted as original signatures.                                                                                                                  |       |                                                            |         |             |  |