

No. 52859	<b>Idaho Corporation Annual Report Form</b> Due No Later Than November 1, 1994		2. Registered Agent and Office																							
Return To  <b>Secretary of State</b> <b>Room 203, Statehouse</b> <b>P.O. BOX 83720</b> <b>Boise, ID 83720-0080</b> * FIRST NOTICE * NO FEE REQUIRED	1. Mailing Address — SHAWVER FARMS, INC. JAMES SHAWVER ROUTE 1  EDEN ID 83325		JAMES SHAWVER ROUTE 1  EDEN ID 83325  3. Incorporated Under The Laws of ID NO: 52859																							
	4. Names and Addresses of Officers and Directors <b>MUST BE PRINTED OR TYPED</b> <table border="1"> <thead> <tr> <th></th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>President:</td> <td>JAMES SHAWVER</td> <td>Route 1</td> <td>Eden</td> <td>IDaho</td> <td>83325</td> </tr> <tr> <td>Secretary:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Directors:</td> <td>Josephine SHAWVER</td> <td>Route 1</td> <td>Eden</td> <td>IDaho</td> <td>83325</td> </tr> </tbody> </table>				Name	Street or P.O. Address	City	State	Zip	President:	JAMES SHAWVER	Route 1	Eden	IDaho	83325	Secretary:						Directors:	Josephine SHAWVER	Route 1	Eden	IDaho
	Name	Street or P.O. Address	City	State	Zip																					
President:	JAMES SHAWVER	Route 1	Eden	IDaho	83325																					
Secretary:																										
Directors:	Josephine SHAWVER	Route 1	Eden	IDaho	83325																					
5. Nature of Business  FARMING	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 border="1"> <tr> <td>Signature</td> <td>Date</td> </tr> <tr> <td>Name (Typed or Printed)</td> <td>Title</td> </tr> <tr> <td>JAMES SHAWVER</td> <td>9-11-94 Pres</td> </tr> </table>				Signature	Date	Name (Typed or Printed)	Title	JAMES SHAWVER	9-11-94 Pres																
Signature	Date																									
Name (Typed or Printed)	Title																									
JAMES SHAWVER	9-11-94 Pres																									