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|--------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|--------------------------------------------------------|---------|-------------|--|
| No. <b>C 87008</b>                                                                                                                                     |                    | <b>Due no later than Jun 30, 2014</b>                                                                                                                                                           |       | 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>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>CRESTVIEW FARMS, INC.<br>CRESTVIEW FARMS CLAYNE S. ZOLLINGER<br>936 E 350 N<br>DECLO ID 83323 |       | CLAYNE S. ZOLLINGER<br>936 E. 350 N.<br>DECLO ID 83323 |         |             |  |
|                                                                                                                                                        |                    |                                                                                                                                                                                                 |       | 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 |  |
| SECRETARY                                                                                                                                              | JOY ZOLLINGER      | 936 E 350 N                                                                                                                                                                                     | DECLO | ID                                                     | USA     | 83323       |  |
| PRESIDENT                                                                                                                                              | CLAYNE S ZOLLINGER | 936 E 350 N.                                                                                                                                                                                    | DECLO | ID                                                     | USA     | 83323       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>C 87008</b>                                                                                           |                    | 6. Annual Report must be signed.*<br>Signature: Clayne Zollinger<br>Name (type or print): Clayne Zollinger<br><br>Date: 04/11/2014<br>Title: Pres.                                              |       |                                                        |         |             |  |
| Processed 04/11/2014                                                                                                                                   |                    | * Electronically provided signatures are accepted as original signatures.                                                                                                                       |       |                                                        |         |             |  |