

No. <b>C 80043</b>	<b>Annual Report Form</b> <i>Due No Later Than November 30,</i>		<b>1996</b>	2. Registered Agent and Office <b>NOT A P.O. BOX</b>																		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FEE REQUIRED</b>  <b>* FIRST NOTICE *</b>	1. Mailing Address - Please Correct, If Not Correct		H DAVID CHRISTENSEN 13250 VAN SLYKE RD  WILDER ID 83676																			
	TRI-MINT FARMS, INC. H. DAVID CHRISTENSEN 18250 VAN SLYKE RD  WILDER ID 83676		3. Organized Under the Laws of:  ID C 80048																			
	4. Corporations: Enter Names and Addresses of <b>President, Secretary and Directors</b> Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> <b>Managers</b> or <input type="checkbox"/> <b>Members</b> (check one)																					
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;"><u>Office held</u></th> <th style="width: 25%;"><u>Name</u></th> <th style="width: 30%;"><u>Street or P.O. Address</u></th> <th style="width: 15%;"><u>City</u></th> <th style="width: 10%;"><u>State</u></th> <th style="width: 10%;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>Pres.</td> <td>H. David Christensen</td> <td>18250 Van Slyke Rd.</td> <td>Wilder</td> <td>ID.</td> <td>83676</td> </tr> <tr> <td>Sec.</td> <td>Sandra Christensen</td> <td>"</td> <td>"</td> <td>"</td> <td>"</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>	Pres.	H. David Christensen	18250 Van Slyke Rd.	Wilder	ID.	83676	Sec.	Sandra Christensen	"	"	"	"
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Sec.	Sandra Christensen	"	"	"	"																	
5. <b>NATURE OF BUSINESS</b>  <b>FARMING</b>		6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. Signature <u>H. David Christensen</u> Date <u>8-12-96</u> Name (Typed or Printed) <u>H. David Christensen</u> Title <u>Pres.</u>																				

ISSUED: 07-06-1996

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