

No. C 50765	Due no later than Jan 31, 2012 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. STORY FARMS, INC. LARRY J STORY 29983 HIGHWAY 18 PARMA ID 83660 USA		LARRY STORY 28283 HWY 18 PARMA ID 83660			
			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
PRESIDENT	LARRY J STORY	28283 HWY 18	PARMA	ID	USA	83660
SECRETARY	GREGG E STORY	25600 CANAL ROAD	PARMA	ID	USA	83660
5. Organized Under the Laws of: ID C 50765	6. Annual Report must be signed.* Signature: Larry Story Name (type or print): Larry Story		Date: 11/07/2011 Title: President			
Processed 11/07/2011		* Electronically provided signatures are accepted as original signatures.				