No. <b>C 195893</b>		Due no later than Sep 30, 2014		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		2000 2000 11 10 10 10 10 10 10 10 10 10 10 10	LAMAR N ORTON			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  ORTON BOTANICAL GARDEN, INC LAMAR N ORTON 867 FILER AVE W TWIN FALLS ID 83301		TWIN FALLS	867 FILER AVE W TWIN FALLS ID 83301  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Corporations: Enter Na	mes and Busin	ess Addresses of Pr	esident, Secretary, and Directors. Treas	urer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR DIRECTOR SECRETARY VICE PRESIDENT PRESIDENT	KENDALL WAYNE ORTON DAVID EUGENE ORTON JEREMY ASH ORTON ROSALIE MARIA ORTON LAMAR NEFF ORTON		10166 WEST CAYUSE 491 SAGEBRUSH 160 HANKINS ROAD 867 FILER AVE W 867 FILER AVE W	BOISE TWIN FALLS TWIN FALLS TWIN FALLS TWIN FALLS	ID ID ID ID	USA USA USA USA USA	83714 83301 83301 83301 83301	
5. Organized Under the Laws of: 6.		6. Annual Report must be signed.*						
ID		Signature: LaMa		Date: 07/11/2014				
C 195893		Name (type or p		Title: President				
Processed 07/11/2014 * Electronically provided signatures are accepted as original signatures.								