

|  |                |   |           |   |         |             |
|--|----------------|---|-----------|---|---------|-------------|
| No. <b>C 29290</b>   |                | Due no later than May 31, 2015<br><b>Annual Report Form</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>1. Mailing Address: Correct in this box if needed.</b><br>HOP GROWERS OF AMERICA, INC.<br>ANN GEORGE<br>PO BOX 1207<br>MOXEE WA 98936<br>USA |           | TRACEY L TENGS<br>101 E GROVE AVE<br>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 |
| DIRECTOR   | TOM BRITZ      | 700 KM RANCH RD   | WHITEFISH | MT  | USA     | 59937       |
| DIRECTOR   | NATE JACKSON   | 1201 S KIMBALL  | CALDWELL  | ID  | USA     | 83607       |
| DIRECTOR   | PAUL FOBERT    | 18871 FOBERT RD NE  | HUBBARD   | OR  | USA     | 97032       |
| PRESIDENT  | KYLE SHINN     | 780 HOP RD  | TOPPENISH | WA  | USA     | 98948       |
| SECRETARY  | JARED FAVILLA  | 5050 W WAPATO RD  | WAPATO    | WA  | USA     | 98951       |
| DIRECTOR   | KEVIN RIEL     | 8491 BRANCH RD  | HARRAH    | WA  | USA     | 98933       |
| VICE PRESIDENT   | BLAKE CROSBY   | P O BOX 361   | WOODBURN  | OR  | USA     | 97071       |
| DIRECTOR   | GRAHAM GAMACHE | P O BOX 982   | TOPPENISH | WA  | USA     | 98948       |
| 5. Organized Under the Laws of:<br><br><b>WA<br/>C 29290</b>   |                | 6. Annual Report must be signed.*<br>Signature: Ann George<br>Name (type or print): Ann George<br>Date: 05/07/2015<br>Title: Administrator      |           |   |         |             |
| Processed 05/07/2015   |                | * Electronically provided signatures are accepted as original signatures.   |           |   |         |             |