| No   | Idaho Corporation Annual Report Form  Due No Later Than November 1, 1990  1. Mailing Address — Please Correct  ORME FARMS, INC.  ROBERT D. ORME  RT 2 BOX 52-A |  | 2. Regis    | 2. Registered Agent and Office    |                   |                |  |
|--|--|--|-------------|-----------------------------------|-------------------|----------------|--|
| Return To  Secretary of State Room 203, Statehouse Boise, ID 83720 |  |  |             | ROBERT D ORME                     |                   |                |  |
|  |  |  | Bon.        |                                   |                   |                |  |
|  |  |  | ST.         | ANTHONY                           | ID                | 83445          |  |
|  |  |  | 3. Incor    | 3. Incorporated Under The Laws of |                   |                |  |
| NO FEE REQUIRED  | ST. ANTHONY  | ID 83445                                     | No:         | 049053                            |                   |                |  |
| 4. Names and Addresses of Officer                                  | rs and Directors   |  |             |                                   | 100.7             |                |  |
|  | <u>Name</u>  | Street or P.O. Address                       |             | <u>City</u>                       | <u>State</u>      | <u>Zip</u>     |  |
| President: Robert D. Orm<br>Secretary: Carol W. Orm                |  | Rt. 2 Box 52 A<br>Rt. 2 Box 52 A             |             | Anthony,<br>Anthony,              | Idaho<br>Idaho    | 83445<br>83445 |  |
| Directors: Rich E. Orme  |  | 200 N. 7th E.                                | St.         | Anthony,                          | Idaho             | 83445          |  |
|  |  |  |             |                                   |                   |                |  |
|  |  |  |             |                                   |                   |                |  |
|  |  |  |             |                                   |                   |                |  |
|  |  |  |             |                                   |                   |                |  |
|  |  |  |             |                                   |                   | •              |  |
| 5. Nature of Business  | 6. I certify that true, correct  | this Annual Report has been ex and complete. | amined by r | ne and is to the                  | best of my l      | nowledge       |  |
| Farming & Livestock  | Signature  | Jobert W. Ir                                 | ne_         |                                   | ul <b>y</b> 28, 1 | L990           |  |
|  | Name (Typed or Printed)  | Robert D. Orme                               |             | Title F                           | resident          |                |  |