No. C 51249		Due no later than Apr 30, 2012 Annual Report Form 1. Mailing Address: Correct in this box if needed. MEDICINE LODGE CATTLE ASSOCIATION, INC. LYNN H HOGAN 2060 MEDICINE LODGE RD DUBOIS ID 83423		2. Registered Age	Registered Agent and Address (NO PO BOX) LYNN HOGGAN 2060 MEDICINE LODGE RD DUBOIS ID 83423 3. New Registered Agent Signature:*			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE				2060 MEDICINI DUBOIS ID 8				
4. Corporations: Enter Na	mes and Busin	ess Addresses of P	resident, Secretary, and Directors. Treasu	rer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR DIRECTOR DIRECTOR SECRETARY	David Hoggan Matt Hoggan Marlowe Goble Lynn H Hoggan		1968 E 1800 N 2060 MEDICINE LODGE RD 2380 N 400 E SUITE G 2060 MEDICINE LODGE RD	HAMER DUBOIS NORTH LOGAN DUBOIS	ID ID ID	USA USA USA USA	83425 83423 83431 83423	
PRESIDENT	BOB ROWLAND		2131 S 75 W	IDAHO FALLS	ID	USA	83402	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 51249		Signature: Lynn Hoggan			Date: 03/21/2012			
		Name (type or print): Lynn Hoggan			Title: Secretary			
Processed 03/21/2012	* Electronically provided signatures are accepted as original signatures.							