

No.	Idaho Corporation Annual Report Form Due No Later Than November 1, 1992		2. Registered Agent and Office NOT A P.O. BOX RUSSELL D. WYNN 910 HILLCREST AMERICAN FALLS ID 83211																									
Return To Secretary of State Room 203, Statehouse Boise, ID 83720 * FIRST NOTICE * NO FEE REQUIRED	1. Mailing Address - Please Correct, If Not Correct		3. Incorporated Under The Laws of ID NO: 40515																									
	LAKESIDE FARMS, INC. RUSSELL D. WYNN 910 HILLCREST AVENUE AMERICAN FALLS ID 83211 0000																											
4. Names and Addresses of Officers and Directors																												
<table border="1"> <thead> <tr> <th></th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>President:</td> <td>Karla Wynn</td> <td>444 Michael Ave</td> <td>POCATELLO</td> <td>ID</td> <td>83201</td> </tr> <tr> <td>Secretary:</td> <td>Russell D Wynn</td> <td>444 Michael Ave</td> <td>POCATELLO</td> <td>ID</td> <td>83201</td> </tr> <tr> <td>Directors:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>						Name	Street or P.O. Address	City	State	Zip	President:	Karla Wynn	444 Michael Ave	POCATELLO	ID	83201	Secretary:	Russell D Wynn	444 Michael Ave	POCATELLO	ID	83201	Directors:					
	Name	Street or P.O. Address	City	State	Zip																							
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Secretary:	Russell D Wynn	444 Michael Ave	POCATELLO	ID	83201																							
Directors:																												
5. Nature of Business Retail Fertilizer	6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.																											
	Signature <u>Russell Wynn</u> Date <u>7/20/92</u> Name (Typed or Printed) <u>Russell Wynn</u> Title <u>Sec/Treas</u>																											