


No. C 106921	Due no later than July 31, 2006		2. Registered Agent and Office NO PO BOX																			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	Annual Report Form																					
	1. Mailing Address - Correct in this box, if applicable WILLIAMS FOREST NURSERY, INC. EDMUND J WILLIAMS 420 W POLELINE RD REXBURG, ID 83440 <i>9286 Outflow Pass Menan, ID 83434</i>		EDMUND J WILLIAMS 420 W POLELINE RD REXBURG, ID 83440 3. <u>New</u> Registered Agent Signature																			
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Office held</th> <th style="width: 25%;">Name</th> <th style="width: 35%;">Street or P.O. Address</th> <th style="width: 15%;">City</th> <th style="width: 10%;">State</th> <th style="width: 10%;">Zip</th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Edmund Williams</td> <td>9286 Outflow Pass</td> <td>Menan</td> <td>ID</td> <td>83434</td> </tr> <tr> <td>Secretary</td> <td>Arlene Williams</td> <td>9286 Outflow Pass</td> <td>Menan</td> <td>ID</td> <td>83434</td> </tr> </tbody> </table>					Office held	Name	Street or P.O. Address	City	State	Zip	President	Edmund Williams	9286 Outflow Pass	Menan	ID	83434	Secretary	Arlene Williams	9286 Outflow Pass	Menan	ID	83434
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Secretary	Arlene Williams	9286 Outflow Pass	Menan	ID	83434																	
5. Organized Under the Laws of: IDAHO C 106921	6. Signature  Date <u>5/13/06</u> Name (Typed or Printed) <u>Edmund Williams</u> Title <u>President</u>																					

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