No. C 51646		Due no later than Jul 31, 2009 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	JANSS FA PETER C P.O. BOX	1. Mailing Address: Correct in this box if needed. JANSS FARMS, INC. PETER C JANSS P.O. BOX 99 BLISS ID 83314		PETER C JANSS 436 E 1150 S BLISS ID 83314 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DAT	TE						
4. Corporations: Enter Names a	and Business Addresse	s of President, Secretary, and Directors. Tre	easurer (optional).				
Office Held Nar	ne	Street or PO Address	City	State	Country	Postal Code	
	ISON W. W. JANSS ER C JANSS	P.O. BOX 99 P.O. BOX 99	BLISS BLISS	ID ID	USA USA	83314 83314	
5. Organized Under the Laws of	of: 6. Annual R	6. Annual Report must be signed.*					
ID ID		e: Allison Janss		Date: 05/17/2009			
C 51646	Name (ty	Name (type or print): Allison Janss		Title: Secretary			
Processed 05/17/2009	* Electronica	* Electronically provided signatures are accepted as original signatures.					