

| | | | | | | | |
|--|-----------|---|------|--|---------|-------------|--|
| No. C 92783 | | Due no later than Jul 31, 2009 | | 2. Registered Agent and Address (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 needed. MURPHY FLAT FARMS, INC. MIKE IHLE 643 S SCHOOL AVE KUNA ID 83634 | | MIKE IHLE 643 S SCHOOL AVE KUNA ID 83634 | | | |
| | | | | 3. <u>New</u> Registered Agent Signature: * | | | |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional). | | | | | | | |
| Office Held | Name | Street or PO Address | City | State | Country | Postal Code | |
| SECRETARY | MIKE IHLE | 643 S. SCHOOL AVE. | KUNA | ID | USA | 83634 | |
| 5. Organized Under the Laws of: ID C 92783 | | 6. Annual Report must be signed.* Signature: Mike Ihli Name (type or print): Mike Ihli Date: 07/22/2009 Title: Registered Agent | | | | | |
| Processed 07/22/2009 | | * Electronically provided signatures are accepted as original signatures. | | | | | |