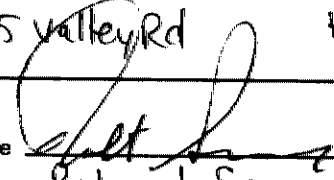


No. C 53212	Annual Report Form <i>Due No Later Than November 30, 1999</i>		2. Registered Agent and Office NOT A P.O. BOX	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED	1. Mailing Address - Please Correct, If Not Correct		ROBERT SEVERANCE 1056 S 1700 E	
	SEVERANCE FARM, INC. ROBERT SEVERANCE 1056 S 1700 E		EDEN ID 83325	
			3. Organized Under the Laws of:	
* FIRST NOTICE *				
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of ☐ Managers or ☐ Members (check one)				
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u> <u>Zip</u>
President + Director	Robert Severance	1056 S 1700 E	Eden	ID 83325
Secretary + Director	Philip Severance	494 Crestview Dr	Twin Falls	ID 83301
Director	Linda Roice	865 Valley Rd	Hazelton	ID 83335
5. Signature of New Registered Agent		6.		
		Signature 	Date 7/19/99	
		Name (Typed or Printed) Robert Severance	Title President	

ISSUED: 07-03-1999

5373