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|--|-----------------|--|---------------|--|---------|-------------|--|
| No. C 100143 | | Due no later than Nov 30, 2005 | | 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 | | 1. Mailing Address: Correct in this box if needed. LEVIG NURSERY, INC. LESLIE H. LEVIG POB 1506 BONNERS FERRY ID 83805 0000 | | LESLIE H. LEVIG HCR 60 BOX 31 KINGS ROW BONNERS FERRY ID 83805 0000 | | | |
| | | | | 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 | |
| PRESIDENT | DONALD R LINCKS | HCR 60 BOX 31 | BONNERS FERRY | ID | USA | 83805 | |
| SECRETARY | LESLIE H LEVIG | HCR 60 BOX 31 | BONNERS FERRY | ID | USA | 83805 | |
| 5. Organized Under the Laws of: IDAHO C 100143 | | 6. Annual Report must be signed.* Signature: STEVEN W DEITZ Name (type or print): STEVEN W DEITZ Date: 11/30/2005 Title: C.P.A. | | | | | |
| Processed 11/30/2005 | | * Electronically provided signatures are accepted as original signatures. | | | | | |