

No. <b>C 137747</b>		<b>Due no later than Feb 28, 2010</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>1. Mailing Address: Correct in this box if needed.</b>  CARL AND IMAGENE HOEHNER FAMILY FOUNDATION, INC. MURRAY JIM SORENSEN PO BOX 1047 BLACKFOOT ID 83221 USA		MURRAY JIM SORENSEN 285 NW MAIN ST BLACKFOOT ID 83221			
						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	
DIRECTOR	IMAGENE HOEHNER	7090 RUNNING IRON LN	POCATELLO	ID	USA	83204	
DIRECTOR	CARL HOEHNER	7090 RUNNING IRON LN	POCATELLO	ID	USA	83204	
5. Organized Under the Laws of:  <b>ID</b> <b>C 137747</b>		6. Annual Report must be signed.*  Signature: Murray Jim Sorensen Name (type or print): Murray Jim Sorensen					
Processed 12/23/2009		Date: 12/23/2009 Title: Registered Agent  * Electronically provided signatures are accepted as original signatures.					