

No. C 191272		Due no later than Jun 30, 2015 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 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. PURE FARM PRODUCE INCORPORATED TOM MURPHY PO BOX 939 COEUR D ALENE ID 83816 USA		TOM MURPHY 741 E ARENA LOOP HAYDEN ID 83835			
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	TOM MURPHY	PO BOX 939	COEUR D ALENE	ID	USA	83816	
5. Organized Under the Laws of: ID C 191272		6. Annual Report must be signed.* Signature: TOM MURPHY Name (type or print): TOM MURPHY					
Processed 07/28/2015		* Electronically provided signatures are accepted as original signatures.					
Date: 07/28/2015 Title: PRESIDENT							