

No. <b>C 51249</b>	<b>Annual Report Form 1996</b> <i>Due No Later Than November 30,</i>		2. Registered Agent and Office <b>NOT A P.O. BOX</b> <b>LYNN HOGGAN</b>  <b>DUBOIS ID 83423</b>																												
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FEE REQUIRED</b>  <b>** FINAL NOTICE **</b>	1. Mailing Address - Please Correct, If Not Correct <b>MEDICINE LODGE CATTLE ASSOCI</b> <b>LYNN H. HOGGAN</b> <b>P. O. BOX 1370</b>  <b>DUBOIS ID 83423</b>		3. Organized Under the Laws of:  <b>ID C 51249</b>																												
4. Corporations: Enter Names and Addresses of <b>President, Secretary and Directors</b> Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> <b>Managers</b> or <input type="checkbox"/> <b>Members</b> (check one)																															
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 15%;"><u>Office held</u></th> <th style="text-align: left; width: 25%;"><u>Name</u></th> <th style="text-align: left; width: 30%;"><u>Street or P.O. Address</u></th> <th style="text-align: left; width: 15%;"><u>City</u></th> <th style="text-align: left; width: 10%;"><u>State</u></th> <th style="text-align: left; width: 15%;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>Pres</td> <td>Bob Rowland</td> <td>2131 St West</td> <td>Idaho Falls</td> <td>ID</td> <td>83402</td> </tr> <tr> <td rowspan="3">Directors</td> <td>Lynn H Hoggan</td> <td>Box 1370</td> <td>Dubois</td> <td>ID</td> <td>83423</td> </tr> <tr> <td>Carl R Hoggan</td> <td>1868 E 1800 N</td> <td>Hamer</td> <td>ID</td> <td>83425</td> </tr> <tr> <td>Stuart Brienholt</td> <td>Box 1380</td> <td>Dubois</td> <td>ID</td> <td>83423</td> </tr> </tbody> </table>				<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	Pres	Bob Rowland	2131 St West	Idaho Falls	ID	83402	Directors	Lynn H Hoggan	Box 1370	Dubois	ID	83423	Carl R Hoggan	1868 E 1800 N	Hamer	ID	83425	Stuart Brienholt	Box 1380	Dubois	ID	83423
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5. <b>NATURE OF BUSINESS</b>  <b>RANCHING</b>		6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. Signature <u>Lynn H Hoggan</u> Date <u>14 Oct 96</u> Name (Typed or Printed) <u>LYNN H HOGGAN</u> Title <u>Director</u>																													

ISSUED: 10-05-1996

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