


No. C100663	Annual Report Form <i>Due No Later Than November 30,</i> 1996		2. Registered Agent and Office NOT A P.O. BOX MICHAEL D. FERGUSON 175 S 5TH W REXBURG ID 83440		
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 FERGUSON HEALTH & NUTRITION MICHAEL D. FERGUSON PO BOX 160 REXBURG ID 83440		3. Organized Under the Laws of: ID C100663		
* FIRST NOTICE *					
4. Corporations: Enter Names and Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> 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	Michael D. Ferguson	P. O. Box 413	Rexburg	ID	83440
Secretary	VaLene Ferguson	P. O. Box 413	Rexburg	ID	83440
Directors	Michael D. Ferguson	"	"	"	"
	VaLene Ferguson	"	"	"	"
5. NATURE OF BUSINESS DIETARY SUPPLEMENT SALES		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  Date _____ Name (Typed or Printed) Michael D. Ferguson Title President			
ISSUED: 07-06-1996		9591			