

86074

INSTRUCTIONS ON REVERSE SIDE PLEASE TYPE OR PRINT

No.	Idaho Corporation Annual Report Form		2. Registered Agent and Office NOT A P.O. BOX																									
Return To	Due No Later Than November 1, 1992		GARY L COX HC 76 BOX 1048																									
* FIRST NOTICE * NO FEE REQUIRED	1. Mailing Address -- Please Correct If Not Correct		AMERICAN FALLS ID 83211																									
	COX BROTHERS FARMS, INC. GARY L COX HC 70 BOX 1048 AMERICAN FALLS ID 83211 0000		3. Incorporated Under The Laws of ID NO: 86074																									
4. Names and Addresses of Officers and Directors																												
<table border="1"> <thead> <tr> <th></th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>President:</td> <td>GARY L. COX</td> <td>RT 1 Box 381</td> <td>Rupert</td> <td>Ida</td> <td>83350</td> </tr> <tr> <td>Secretary:</td> <td>W. HARRISON COX</td> <td>1403 East Wolverine</td> <td>Firth</td> <td>Ida</td> <td>83236</td> </tr> <tr> <td>Directors:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>						Name	Street or P.O. Address	City	State	Zip	President:	GARY L. COX	RT 1 Box 381	Rupert	Ida	83350	Secretary:	W. HARRISON COX	1403 East Wolverine	Firth	Ida	83236	Directors:					
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Directors:																												
5. Nature of Business		6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.																										
FARMING		Signature <u>Gary L. Cox</u> Date <u>7-9-92</u> Name (Typed or Printed) <u>GARY L. COX</u> Title <u>Pres</u>																										