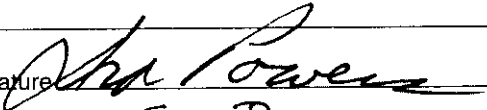
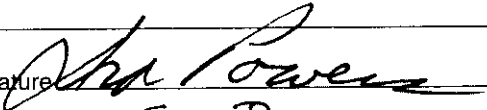
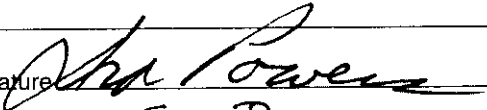


No. C 65727	Due no later than January 31, 2006 Annual Report Form		2. Registered Agent and Office NO PO BOX IRA E POWERS BALL AVENUE PARMA, ID 83660																		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable TREASURE VALLEY HONEY, INC. IRA E POWERS BALL AVENUE, BOX 686 PARMA, ID 83660		3. <u>New</u> Registered Agent Signature																		
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th style="text-align: left; width: 10%;"><u>Office held</u></th> <th style="text-align: left; width: 15%;"><u>Name</u></th> <th style="text-align: left; width: 35%;"><u>Street or P.O. Address</u></th> <th style="text-align: left; width: 10%;"><u>City</u></th> <th style="text-align: left; width: 10%;"><u>State</u></th> <th style="text-align: left; width: 10%;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>Pres</td> <td>Ira Powers</td> <td>27027 Pioneer Lane</td> <td>Parma</td> <td>ID</td> <td>83660</td> </tr> <tr> <td>Sec.</td> <td>Helen Powers</td> <td>"</td> <td>"</td> <td>"</td> <td>"</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	Ira Powers	27027 Pioneer Lane	Parma	ID	83660	Sec.	Helen Powers	"	"	"	"
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Pres	Ira Powers	27027 Pioneer Lane	Parma	ID	83660																
Sec.	Helen Powers	"	"	"	"																
5. Organized Under the Laws of: IDAHO C 65727		6. <table style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <tr> <td style="width: 60%;"> Signature  </td> <td style="width: 40%;"> Date <u>11/11/05</u> </td> </tr> <tr> <td> Name (Typed or Printed) <u>Ira Powers</u> </td> <td> Title <u>President</u> </td> </tr> </table>		Signature 	Date <u>11/11/05</u>	Name (Typed or Printed) <u>Ira Powers</u>	Title <u>President</u>														
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