

No. C 92730		Due no later than Jul 31, 2011 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) TIMOTHY B WILSON 6412 KOOTENAI ST BONNERS FERRY ID 83805																
Return to:  SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. COLSON'S NURSERY, INC. SUE COLSON 7631 DEEP CREEK LP BONNERS FERRY ID 83805		3. New Registered Agent Signature.																
<p>4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors and (optional) Treasurer.</p> <table border="1"> <thead> <tr> <th>Office Held</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>Pres, Sec, Trea</td> <td>Sue Colson</td> <td>7631 Deep Creek Loop</td> <td>Bonners Ferry</td> <td>ID</td> <td>USA</td> <td>83805</td> </tr> </tbody> </table>							Office Held	Name	Street or PO Address	City	State	Country	Postal Code	Pres, Sec, Trea	Sue Colson	7631 Deep Creek Loop	Bonners Ferry	ID	USA	83805
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Pres, Sec, Trea	Sue Colson	7631 Deep Creek Loop	Bonners Ferry	ID	USA	83805														
5. Organized Under the Laws of:  IDAHO C 92730		6. Signature: <u>Sue Colson</u>		Date: 6-5-11																
		Name (type or print): <u>Sue Colson</u>		Title: Pres																
Issued 05/25/2011 by KAH 117821																				