




No. C106921	Annual Report Form 1999 Due No Later Than November 30,		2. Registered Agent and Office NOT A P.O. BOX												
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED * FIRST NOTICE *	1. Mailing Address - Please Correct. If Not Correct WILLIAMS FOREST NURSERY, INC EDMUND J WILLIAMS 922 WEST 2000 SOUTH REXBURG ID 83440		EDMUND J WILLIAMS 922 WEST 2000 SOUTH REXBURG ID 83440 3. Organized Under the Laws of: ID C106921												
4. Corporations: Enter Names and Business 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) <table border="0"> <thead> <tr> <th>Office held</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>Sec-Treas.</td> <td>Arlene Williams</td> <td>922 W. 2000 S</td> <td>Rexburg</td> <td>ID</td> <td>83440</td> </tr> </tbody> </table>				Office held	Name	Street or P.O. Address	City	State	Zip	Sec-Treas.	Arlene Williams	922 W. 2000 S	Rexburg	ID	83440
Office held	Name	Street or P.O. Address	City	State	Zip										
Sec-Treas.	Arlene Williams	922 W. 2000 S	Rexburg	ID	83440										
5. Signature of New Registered Agent		6. <table border="0"> <tr> <td>Signature </td> <td>Date 8/18/99</td> </tr> <tr> <td>Name (Typed or Printed) Edmund Williams</td> <td>Title Pres</td> </tr> </table>		Signature 	Date 8/18/99	Name (Typed or Printed) Edmund Williams	Title Pres								
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ISSUED: 07-03-1999

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