No. C 79939	Due no later than November 30, 2005	
Return to:	Annual Report Form	2. Registered Agent and Office NO DO DO
SECRETARY OF STATE	1. Mailing Address - Correct in this box, if applicable	LON MERRIFIELD
700 WEST JEFFERSON	CLIFTY VIEW NURSERY, INC.	ROUTE 1, BOX 509
PO BOX 83720	LON MERRIFIELD	COUNTY RD 23-1
BOISE, ID 83720-0080	ROUTE 1, BOX 509	BONNERS FERRY, ID 83805
	BONNERS FERRY, ID 83805	7.44 55555
NO FILING FEE IF		2 Nov D
RECEIVED BY DUE DATE		3. New Registered Agent Signature
4. Cornorations: Enter Ma		
- Suporations, Enter Na	imes and Business Addresses of President Socre	
Office held Name	ames and Business Addresses of President, Secre	tary and Directors.
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	Ci	ty State -
President Law F	Mari Gill Roll of Till Till	ty <u>State</u> <u>Zip</u>
President Lon E.	Merrifield Route 1, Box 509 Box	Nurs Fury Table 82 80 5
President Low E. Secretary Down he	Merrifield Route 1, Box 509 Box	Nurs Fury Idaha 83805
President Low E. Secretary Donna M	Merrifield Route 1, Box 509 Box. Merrifield Route 1, Box 509 Box	INUTS FUTY Idaho \$3805 NUTS FUTY TOLL PRES
President Lon E. Secretary Donna M Directors Store k	Merrifield Route 1, Box 509 Box. Merrifield Route 1, Box 509 Box	INUTS FUTY Idaho \$3805 NUTS FUTY TOLL PRES
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