| No. C 186742 | Reinstatement Annual Report Form<br>ADMIN DISSOLVED 06/17/2014 | 2. Registered Agent and Office<br>**(NOT A P.O. BOX)** |
|---|---|---|
| Return to:<br>SECRETARY OF STATE<br>450 N 4th STREET<br>PO BOX 83720<br>BOISE, ID 83720-0080 | **1. Mailing Address: Correct in this box if needed.**<br>MERIDIAN FIREFIGHTERS PIPES & DRUMS, LTD.<br><s>4960 N MAIDSTONE WY</s><br><s>BOISE ID 83713</s><br>*13934 W. MILFORD DR.*<br>*BOISE, ID 83713* | GREG WARDEIN<br><s>4960 N MAIDSTONE WY</s><br><s>BOISE ID 83713</s><br>*13934 W. MILFORD DR.*<br>*BOISE, ID 83713* |
| **REINSTATEMENT FEE**<br>DUE: **$30.00** | | 3. <u>New</u> Registered Agent Signature. |

4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres.

| Office Held | Name | Street or PO Address | City | State | Country | Postal Code |
|---|---|---|---|---|---|---|
| *PRESIDENT* | *TONY CHANCE* | *13934 W. MILFORD DR* | *BOISE* | *ID* | | *83713* |
| *TREASURER/*<br>*SECRETARY* | *GREG WARDEIN* | *13934 W. MILFORD DR.* | *BOISE,* | *ID* | | *83713* |

| 5. Organized Under the Laws of:<br><br>**IDAHO**<br>**C 186742** | 6.<br><br>Signature: _____*GREG WARDEIN*____<br>Name (type or print): _____ | Date: *2-12-15*<br><br>Title:<br>*TREASURER/SEC.* |
|---|---|---|

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# INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM