| No. C 106289 | Reinstatement Annual Report Form ADMIN DISSOLVED 08/07/2012 2. Registered Agent and Office (NOT A P.O. BOX) CHRISTOPHER B MERRILL | |
|---|--|---|
| SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 | 1. Mailing Address: Correct in this box if needed. H.D.H., INC. CHRISTOPHER B MERRILL 776 RANCH DRIVE EAGLE ID 83616 | |
| reinstatement fee due: \$30.00 | | 3. <u>New</u> Registered Agent Signature. |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors and (optional) Treasurer. Office Held Name Street or PO Address City State Country Postal Code PRESIDENT JEFF WEBER 10465 STONE PAYETTE ID USA 9366 QUARRY RD GERTILL | | |
| DIRECTOR THOMAS OLD 1780 S. WATERSILK BOISE ID USA 83709 DRIVE | | |
| 5. Organized Under the Lav IDAHO C 106289 | Name (type or print): CHRISTOPHER B MERRIL | Date: 9/20/12 Title: 565/TRES |
| | | |

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the corrected address **must** be inside Block 1.