

**FILED EFFECTIVE**

| No. <b>C 174241</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <b>Reinstatement Annual Report Form<br/>ADMIN DISSOLVED 10/06/2009</b>                                                                               |                             | 2. Registered Agent and Office (NOT A P.O. BOX)<br>FORREST BIRD<br>1655 GLENGARY BAY RD<br>SAGLE ID 83860 |                                    |                      |                                            |                          |       |         |             |           |                 |                             |  |  |  |       |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|-----------------------------------------------------------------------------------------------------------|------------------------------------|----------------------|--------------------------------------------|--------------------------|-------|---------|-------------|-----------|-----------------|-----------------------------|--|--|--|-------|
| Return to:<br>SECRETARY OF STATE<br>450 N 4th STREET<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>REINSTATEMENT<br/>FEE DUE: \$30.00</b>                                                                                                                                                                                                                                                                                                                                        | 1. Mailing Address: Correct in this box if needed.<br><br>BIRD AVIATION MUSEUM AND INVENTION<br>CENTER, INC.<br><br>PO BOX 817<br>SANDPOINT ID 83864 |                             |                                                                                                           | 3. New Registered Agent Signature. |                      |                                            |                          |       |         |             |           |                 |                             |  |  |  |       |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors and (optional) Treasurer. <i>USA</i><br><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>President</td> <td>Forrest M. Bird</td> <td>P.O. Box 817, Sandpoint, ID</td> <td></td> <td></td> <td></td> <td>83864</td> </tr> </tbody> </table> |                                                                                                                                                      |                             |                                                                                                           | Office Held                        | Name                 | Street or PO Address                       | City                     | State | Country | Postal Code | President | Forrest M. Bird | P.O. Box 817, Sandpoint, ID |  |  |  | 83864 |
| Office Held                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Name                                                                                                                                                 | Street or PO Address        | City                                                                                                      | State                              | Country              | Postal Code                                |                          |       |         |             |           |                 |                             |  |  |  |       |
| President                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Forrest M. Bird                                                                                                                                      | P.O. Box 817, Sandpoint, ID |                                                                                                           |                                    |                      | 83864                                      |                          |       |         |             |           |                 |                             |  |  |  |       |
| 5. Organized Under the Laws of: <b>IDAHO</b><br><b>C 174241</b> <table border="1"> <tr> <td>Signature: <i>Lisa M. Allen</i></td> <td>Date: <i>10/9/09</i></td> </tr> <tr> <td>Name (type or print): <i>Lisa M. Allen</i></td> <td>Title: <i>Bookkeeper</i></td> </tr> </table>                                                                                                                                                                                                       |                                                                                                                                                      |                             |                                                                                                           | Signature: <i>Lisa M. Allen</i>    | Date: <i>10/9/09</i> | Name (type or print): <i>Lisa M. Allen</i> | Title: <i>Bookkeeper</i> |       |         |             |           |                 |                             |  |  |  |       |
| Signature: <i>Lisa M. Allen</i>                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Date: <i>10/9/09</i>                                                                                                                                 |                             |                                                                                                           |                                    |                      |                                            |                          |       |         |             |           |                 |                             |  |  |  |       |
| Name (type or print): <i>Lisa M. Allen</i>                                                                                                                                                                                                                                                                                                                                                                                                                                           | Title: <i>Bookkeeper</i>                                                                                                                             |                             |                                                                                                           |                                    |                      |                                            |                          |       |         |             |           |                 |                             |  |  |  |       |