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No. C 67930 Return to:	Reinstatement Ar ADMIN DISSOLV	•	P.O. BOX)	ent and Office (NOT A
SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if need SHOSHONE COUNTY WOMEN'S RESOURCE		KELLOGG ID 8383/ Silvertro ID	
,	CENTER, INC. BETTY MAXWELL THE 122 E CAMERO! KELLOGG ID 8383.	O-BOK343	3. New Registered A	$\overline{}$ $(A)$ .
REINSTATEMENT FEE DUE: \$30.00		25801	( Muchon	J) (35,1, 4,00
4. Corporations: Enter Nam	nes and Business Addresses of I	President, Secretary, Dire	ctors and(optional) Treasu	rer.
Office Held Na		reet or PO Address	City Stat	e Country Postal Code
Board President	theresa Dimico P.O.	BOX 328	Silverton, Ilo	Shoshore 83867
Di mai mis	Annate Vicker P.	). Box 328	Silverton, Ilo	Shothore 83867
Erma Dunn	Annette Vickrey for Secretary P.1	). Box 328	Silverton, 7-10	Shoshove 85867
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5. Organized Under the La	ws of: 6.			
IDAHO	Signature:	MILE DOLLA	(IC)	Date: 7/4-09
				Burd
C 67930	Name (type or print)	Theresa Di	mied	Title Prosident
Issued 06/29/2009 by SL1				,

## INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Pay special attention to the mailing address. If the correct 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.

Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. Note: The office of the registered agent must be at a street address in Idaho; not a Post Office Box or Personal Mail Box.

Block 3: Only a <u>new</u> registered agent must sign in Block 3.

Block 4: Enter names and business addresses of president, secretary, and directors. Note: <u>Do not put "same as last year" or "same as above"</u>. These will not be accepted.

Block 5: May not be altered through the use of this form.

**Block 6:** The annual report must be signed by a person authorized to represent the corporation. Print or type the name of the signer below the signature.