No. C 174367	Reinstatement Annual Report Form ADMIN DISSOLVED 11/05/2009	Registered Agent and Office (NOT A P.O. BOX) JONATHAN ZUCKER
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	<u> </u>	31911 NORTH 5TH AVE
	1. Mailing Address: Correct in this box if needed.	SPIRIT LAKE ID 83869
	SPIRIT LAKE BOOKS AND COFFEE INC	
	PO BOX 1509	3. New Registered Agent Signature.
	SPIRIT LAKE ID 83869	Cont (Care Care Agent alament)
REINSTATEMENT		
FEE DUE: \$30.00		
4. Corporations: Enter Nam	es and Business Addresses of President, Secretary, Directors	and(optional) Treasurer.
Office Held Nam		City State Country Postal Code
200 Desilut	Joseph Zuch 10 Box 150	9 Statute 1083861
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5. Organized Under the Law	rs of: 6.	
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IDAHO	Signature:	Date:
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C 174367	Name (type or print):	Title:
Issued 12/18/2009 by SLD	k	