

No. W 113549

Reinstatement Annual Report Form
ADMIN DISSOLVED 08/12/2013

Return to:

SECRETARY OF STATE
450 N 4th STREET
PO BOX 83720
BOISE, ID 83720-0080

REINSTATEMENT FEE
DUE: \$30.00

1. Mailing Address: Correct in this box if needed.

SPAULDING COUNSELING SERVICES, LLC
403 W CHERRY LN
MERIDIAN ID 83642

4405 E. Flamingo Ave.
Nampa, ID 83687

2. Registered Agent and Office
(NOT A P.O. BOX)

ROY C SPAULDING
2705 S BLUEGRASS DR
NAMPA ID 83686

4405 E. Flamingo Ave
Nampa, ID 83687

3. New Registered Agent Signature.

4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.

Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code
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Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Roy C. Spaulding	4405 E Flamingo Ave.	Nampa	ID		83687
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Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Angela H. Spaulding	"	"	"	"	"
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Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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5. Organized Under the Laws of:

IDAHO
W 113549

6.

Signature:

Name (type or print):

Roy Spaulding

Date:

7/13/16

Title:

Member