| No. C 45345 | Reinstatement Annual Report Form<br>ADMIN DISSOLVED 07/15/2014 | 2. Registered Agent and Office (NOT A P.O. BOX) |
|---|---|---|
| Return to:<br>SECRETARY OF STATE<br>450 N 4th STREET<br>PO BOX 83720<br>BOISE, ID 83720-0080 | 1. Mailing Address: Correct in this box if needed.<br>DEVELOPMENT WEST CORPORATION<br>ALONZO B. LEAVELL<br>PO BOX 54<br>GOODING ID 83330 USA | ALONZO B. LEAVELL<br>LEAVELL CATTLE YARD NW OF CITY<br>1807 E 1750 S<br>GOODING ID 83330 |
| REINSTATEMENT FEE DUE: $30.00 | | 3. New Registered Agent Signature. |

4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres.

| Office Held | Name | Street or PO Address | City | State | Country | Postal Code |
|---|---|---|---|---|---|---|
| DIRECTOR | CHARMIANNE LEAVELL | PO BOX 54 | GOODING | ID | USA | 83330 |
| DIRECTOR | ALONZO B. LEAVELL | PO BOX 54 | GOODING | ID | USA | 83330 |
| SECRETARY | CHARMIANNE LEAVELL | PO BOX 54 | GOODING | ID | USA | 83330 |
| PRESIDENT | ALONZO B. LEAVELL | PO BOX 54 | GOODING | ID | USA | 83330 |

| 5. Organized Under the Laws of: | 6. |
|---|---|
| IDAHO<br>C 45345 | Signature: Alonzo B Leavell Date: 10/2/14<br>Name (type or print): ALONZO B. LEAVELL Title: PRESIDENT |

Issued 10/01/2014 by DKI

**INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM**