

REINSTATEMENT

No. C 85438	Annual Report Form		2. Registered Agent and Office NOT A P.O. BOX JIM KLEEBURG 409 VISTA LEWISTON ID 83501
Return to: SECRETARY OF STATE 700 WEST JEFFERSON P.O. BOX 83720 BOISE, ID 83720-0080 FEE DUE	1. Mailing Address - Please Correct, If Not Correct TWIN RIVERS CYCLISTS, INC. PO BOX 2108 LEWISTON ID 83501		3. Organized Under the Laws of: ID C 85438
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one)			
Office Held	Name	Street or P.O. Address	City State Zip
PRESIDENT	JIM KLEEBURG	409 VISTA	LEWISTON ID 83501
VICE PRESIDENT	DEBBIE WHITELY	1524 QUAIL RUN DR.	LEWISTON ID 83501
SECRETARY	KATHY CONE	2427 14th Street	LEWISTON ID 83501
TREASURER	Steve Largent	2430 Seaport Dr.	LEWISTON ID 83501
5. Signature of New Registered Agent		6. Signature <u>[Signature]</u> Date <u>3/8/99</u> Name (Typed or Printed) <u>JIM KLEEBURG</u> Title <u>PRESIDENT</u>	

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

- 1.) Please pay special attention to the mailing address. If it is incorrect, please make the appropriate corrections.
NOTE: The name of the business entity cannot be altered on the annual report form.
- 2.) If the registered agent has changed or moved, please make that correction on this form. The registered agent must be found IN IDAHO at a PHYSICAL ADDRESS. PO Boxes WILL NOT be accepted. If report is for a Limited Liability please refer to #4 below.
- 3.) Corporation: Enter names and addresses of ONLY the president, secretary, and directors in block 4.
 Limited Liability Company: Enter the names and addresses of the managers or members in block 4.
NOTE: Putting "same as last year" WILL NOT be accepted.
- 4.) Limited Liability Company: If the registered agent has been changed in block 2, then the NEW registered agent must accept that position by signing in block 5.
- 5.) Corporation: Block 6 must be signed by an officer or chairman of the board of the corporation. Signer must specify his or her title.
 Limited Liability Company: Block 6 must be signed by a manager or member, who must specify his or her title.
- 6.) If new registered Agent, please sign block 5.

SECRETARY OF STATE
STATE OF IDAHO

MAR 11 PM 1:55

FILED

IDAHO SECRETARY OF STATE

03/11/1999 09:00
 CK: 464 CT: 112486 BH: 196112

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