

No. C 103315	Reinstatement Annual Report Form ADMIN DISSOLVED 12/16/2014		2. Registered Agent and Office (NOT A P.O. BOX) SHIRLEY MAY BUCHANAN 5783 OVERLAND RD BOISE ID 83705																					
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. CHARLIE BROWN'S RESTAURANT LOUNGE, INC. SHIRLEY MAY BUCHANAN 5783 OVERLAND RD BOISE ID 83705		3. <u>New</u> Registered Agent Signature.																					
<p>Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres.</p> <table border="1"> <thead> <tr> <th>Office Held</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>Pres.</td> <td>Shirley Buchanan</td> <td>3304 Cassia st.</td> <td>Boise</td> <td>ID</td> <td></td> <td>83705</td> </tr> <tr> <td>V.P.</td> <td>Bret Buchanan</td> <td>1586 vanderdossen RD.</td> <td>Emmett</td> <td>ID</td> <td></td> <td>83607</td> </tr> </tbody> </table>				Office Held	Name	Street or PO Address	City	State	Country	Postal Code	Pres.	Shirley Buchanan	3304 Cassia st.	Boise	ID		83705	V.P.	Bret Buchanan	1586 vanderdossen RD.	Emmett	ID		83607
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5. Organized Under the Laws of: IDAHO C 103315	6. Signature: <u>Shirley Buchanan</u> Date: <u>12-22-14</u> Name (type or print): <u>Shirley Buchanan</u> Title: <u>Owner</u>																							

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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM