No. C 196077	Reinstatement Annual Report Form ADMIN DISSOLVED 12/20/2016	2. Registered Agent and Office **(NOT A P.O. BOX)** CLYDE BRINEGAR 1925 N LOCUST GROVE RD MERIDIAN ID 83642
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. **Mailing Address: Correct in this box if needed.** TANZANIA ORPHANS UPENDO COMMUNITY, INC. CLYDE E BRINEGAR 1925 N LOCUST GROVE RD MERIDIAN ID 83642	3. New Registered Agent Signature.
REINSTATEMENT FEE DUE: $30.00		

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	TIMOTHY J. KEENAN	3995 SHERINGHAM DR	BOISE	ID		83704
DIRECTOR	CLYDE BRINEGAR	1925 N LOCUST GROVE RD	MERIDIAN	ID		83642
PRESIDENT	KEVIN O'SULLIVAN	6953 KINGSDALE DR	BOISE	ID		83704
DIRECTOR	JOHN C. KEENAN	3995 SHERINGHAM DR	BOISE			83704

5. Organized Under the Laws of:	6. Signature:	Date:
IDAHO C 196077	Name (type or print): JOHN C KEENAN	30 DEC 16 Title: DIRECTOR

Issued 12/30/2016 by online

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM