


No. <b>C 7496</b>	<b>Reinstatement Annual Report Form</b> <b>ADMIN DISSOLVED 08/10/2011</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b>
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. ELM PARK WATER COMPANY 1326 4TH AVE E TWIN FALLS ID 83301		SID VANDERPOOL 470 ELM ST TWIN FALLS ID 83301
<b>REINSTATEMENT FEE</b> <b>DUE: \$30.00</b>			3. New Registered Agent Signature.
<b>Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres.</b>			
<b>Office Held</b>	<b>Name</b>	<b>Street or PO Address</b>	<b>City State Country Postal Code</b>
PRESIDENT	SID VANDERPOOL	PO 657	TWIN FALLS ID TWIN FALLS 83303
5. Organized Under the Laws of:  <b>IDAHO</b> <b>C 7496</b>	6. Signature:  Name (type or print): <b>SID VANDERPOOL</b>		Date: <b>9/30/14</b> Title: <b>PRESIDENT</b>
Issued 09/29/2014 by online			

**INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM**