No. C 70183 Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	Reinstatement Annual Report Form ADMIN DISSOLVED 09/22/2015 1. Malling Address: Correct in this box if needed. D S & S, INC. HARVEY B SUMMERS 1500 S 3000 E SUGAR CITY ID 83448-1231 USA 2. Registered Agent and Office (NOT A P.O. BOX) HARVEY BERT SUMMERS 1500 S 3000 E SUGAR CITY ID 83448 3. New Registered Agent Signature.		
Office Held President Ha Vice President Sa Secretary As Director Ha Director Sa	Name Street or PO Address City State Country Postal Code arvey Bert Summers 1500 S 3000 E Sugar City ID USA 83448 muel J. Summers 271 Mark Dr Rexburg ID USA 83448 rvey Bert Summers 1500 S 3000 E Sugar City ID USA 83448 rvey Bert Summers 1500 S 3000 E Sugar City ID USA 83448 rvey Bert Summers 1500 S 3000 E Sugar City ID USA 83448 muel J. Summers 271 Mark Dr Rexburg ID USA 83448 muel J. Summers 271 Mark Dr Rexburg ID USA 83448 muel J. Summers 271 Mark Dr Rexburg ID USA 83448 halee S. Ricks 1001 S 3000 E Sugar City ID USA 83448		
5. Organized Under the La IDAHO C 70183	Signature: Name (type or print): Harvey Bert Summers Date: U/23/15 Title: President		
Issued 10/13/2015 by online			

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. Note: To ensure future mailings, the corrected address must be inside Block 1.

Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. Note: The office of the registered agent must be at a street address in Idaho, not a Post Office Box or Personal Mail Box.

Block 3: Only a new registered agent must sign in Block 3.

Block 4: Enter names and business addresses of president, secretary, and directors. Note: <u>DO NOT</u> put "same as last year" or "same as above". These will not be accepted. Changes here will not affect the address in Block 1. If more space is needed please add an attachment.

Block 5: May not be altered through the use of this form.

Block 6: The annual report must be signed by a person authorized to represent the corporation. Print or type the name of the signer below the signature.

** The image of this form will be available on the internet once it has been filed. DO <u>NOT</u> enter Social Security numbers,

If the corporation is no longer doing business in Idaho, you may file the appropriate form. Forms are available on the website at www.sos.idaho.gov. However, if no timely annual report is filed, administrative action will be taken, at no cost to the corporation to terminate the legal existence. If you have any questions contact the Commercial Division at (208) 334-2301.

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If the document is incorrect, is there a telephone number to reach you for corrections?	
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