

No. C 127123	Reinstatement Annual Report Form ADMIN DISSOLVED 04/21/2015		2. Registered Agent and Office (NOT A P.O. BOX) DOUGLAS BARCLAY 4130 HELIPORT RD NAMPA ID 83687																		
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. ALPINE HELICOPTER MANAGEMENT, INC. 4130 HELIPORT RD NAMPA ID 83687																				
Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres. <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>Vice President</td> <td>Douglas K Barclay</td> <td rowspan="3">4130 Heliport Dr</td> <td rowspan="3">Nampa</td> <td rowspan="3">Id</td> <td rowspan="3"></td> <td rowspan="3">83687</td> </tr> <tr> <td>Director</td> <td>Douglas K Barclay</td> </tr> <tr> <td>Secretary</td> <td>Douglas K Barclay</td> </tr> </tbody> </table>			Office Held	Name	Street or PO Address	City	State	Country	Postal Code	Vice President	Douglas K Barclay	4130 Heliport Dr	Nampa	Id		83687	Director	Douglas K Barclay	Secretary	Douglas K Barclay	3. <u>New</u> Registered Agent Signature.
Office Held	Name	Street or PO Address	City	State	Country	Postal Code															
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Director	Douglas K Barclay																				
Secretary	Douglas K Barclay																				
5. Organized Under the Laws of: IDAHO C 127123	6. Signature: <u><i>Douglas K Barclay</i></u> Name (type or print): <u>Douglas K Barclay</u>		Date: <u>7-28-15</u> Title: <u>V. President</u>																		

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