REINSTATEMENT

No. C 30923		Annual Report Form	2. Registered A	gend and Office NOT A	P.O. BOX
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO. BOX 83720 BOISE, ID 83720-0080 Forfeited 12/2/97 FEE DUE \$30.00	KIWANIS CLUB SEC BOX 622	g Address - Please Correct, If Not C	BECKY 3225 1 STON 98 DECEM ST SECRETA	MAHURIN /2 /TH ST PN 20 08 350	11
4. Corporations: Enter Nam Limited Liability Compan Office Held	nes and Business A nies: Enter Names a Name	ddresses of President, Secretary and Addresses of ☐ Managers or Street or P.O. Address	Directors Check one)		Zlp
	.	ce Attach list	-		* .
5. Signature of New Flegiste	ered Agent	6. Signature Au Name (Ripped or Tiens	y K Mink	/Title	2-9-84

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

- Please pay special attention to the mailing address. If it is incorrect, please make the appropriate corrections. 1.)
 - NOTE: The name of the business entity cannot be altered on the annual report form.
- If the registered agent has changed or moved, please make that correction on this form. The registered agent must be found IN IDAHO at a 2) PHYSICAL ADDRESS. PO Boxes WILL NOT be accepted. If report is for a Limited Liability please refer to #4 below.
- Corporation: Enter names and addresses of ONLY the president, secretary, and directors in block 4. 3.) Limited Liability Company: Enter the names and addresses of the managers or members in block 4.
 - NOTE: Putting "same as last year" WILL NOT be accepted.
- Limited Liability Company: If the registered agent has been changed in block 2, then the NEW registered agent must accept that position by signing in block 5.
- Corporation: Block 6 must be signed by an officer or chairman of the board of the corporation. Signer must specify his or her title. 5.) Limited Liability Company: Block 6 must be signed by a manager or member, who must specify his or her title.
- 6.) If new registered Agent, please sign block 5.

INCHO SECRETARY OF STATE

12/16/1998 89:00 di: 1169 tt: 18856 M: 170028

1 # 34.00 = 36.00 COMP REING # 2

Lewiston - Clarkston Kiwanis C

Member Name	Address	City, State & Zip
<u> </u>	Name	
FALING, IRV	2428 11TH AVE	LEWISTON ID, 83501
HIBBARD,MONT	1130 LINDEN DR	LEWISTON ID, 83501
MOSCRIP, MIKE	1123 24TH sT	LEWISTON ID, 83501
OHRTMAN-ROGERS, HEATHER	510 BURRELL	LEWISTON ID, 83501
STRICKFADEN, DON	2325 SUNSET DR.	LEWISTON ID, 83501
TRAVIS, JOE	3825 13th St	LEWISTON ID, 83501
HENRY, CHARLES	612 VISTA AVE	LEWISTON ID, 83501
SULLIVAN, SHAWN	3117 5TH ST #3	LEWISTON ID, 83501
MAHURIN, BECKY	3225 1/2 7TH	LEWISTON ID, 83501
MOXLEY, LARRY	1405 HIGHLAND	LARKSTON WA, 99403
Mathison, Don	2254 Valley View Dr	LARKSTON WA, 99404

Board Board Board Board Board First VP President Second VP Treasuer Secretary

4:58 PM

12/9/98