

No. C 48459	Reinstatement Annual Report Form ADMIN DISSOLVED 02/11/2013		2. Registered Agent and Office (NOT A P.O. BOX) RONALD STILES 2857 HWY 34 NORTH SODA SPRINGS ID 83276 <i>DiAnne Stiles</i>														
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. STILES FARMS, INC. RONALD STILES PO BOX 607 SODA SPRINGS ID 83276	3. New Registered Agent Signature. <i>DiAnne H. Stiles</i>													
4. 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>President</td> <td>DiAnne Stiles</td> <td>POBox 607,</td> <td>Soda Springs,</td> <td>ID</td> <td></td> <td>Caribou 83276</td> </tr> </tbody> </table>				Office Held	Name	Street or PO Address	City	State	Country	Postal Code	President	DiAnne Stiles	POBox 607,	Soda Springs,	ID		Caribou 83276
Office Held	Name	Street or PO Address	City	State	Country	Postal Code											
President	DiAnne Stiles	POBox 607,	Soda Springs,	ID		Caribou 83276											
5. Organized Under the Laws of: IDAHO C 48459	6. Signature: <i>DiAnne H. Stiles</i> Name (type or print): <i>DiAnne Stiles</i>			Date: <i>Jan-3-2014</i> Title: <i>President</i>													

Issued 12/26/2013 by KAH

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM