

# REINSTATEMENT

No. C 39242 Return to: SECRETARY OF STATE 700 WEST JEFFERSON P.O. BOX 83720 BOISE, ID 83720-0080 Forfeited 12/3/90 FEE DUE \$30.00	<b>Annual Report Form</b> 1. Mailing Address - Please Correct, if Not Correct MAX D. PARKINSON & SONS, INC. MAX H PARKINSON <del>RT 2 BOX 66 1185 N. 3500 E.</del> ASHTON ID 83420	2. Registered Agent and Office NOT A P.O. BOX MAX H PARKINSON <del>RT 2 BOX 66 1185 N. 3500 E.</del> ASHTON ID 83420 3. Organized Under the Laws of: C 39242																														
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one) <table border="1"> <thead> <tr> <th>Office Held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>President *</td> <td>Max H. Parkinson</td> <td>1185 N. 3500 E.</td> <td>Ashton,</td> <td>Idaho</td> <td>83420</td> </tr> <tr> <td>Secretary</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Vice Pres. &amp;</td> <td>Paul H. Parkinson</td> <td>742 N. 2900 E.</td> <td>St. Anthony,</td> <td>Idaho</td> <td>83445</td> </tr> <tr> <td>Director</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>			Office Held	Name	Street or P.O. Address	City	State	Zip	President *	Max H. Parkinson	1185 N. 3500 E.	Ashton,	Idaho	83420	Secretary						Vice Pres. &	Paul H. Parkinson	742 N. 2900 E.	St. Anthony,	Idaho	83445	Director					
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5. Signature of New Registered Agent	6. <table border="1"> <tr> <td>Signature</td> <td><i>Max H. Parkinson</i></td> <td>Date</td> <td><i>3/1/98</i></td> </tr> <tr> <td>Name (Typed or Printed)</td> <td><i>Max H. Parkinson</i></td> <td>Title</td> <td><i>President</i></td> </tr> </table>		Signature	<i>Max H. Parkinson</i>	Date	<i>3/1/98</i>	Name (Typed or Printed)	<i>Max H. Parkinson</i>	Title	<i>President</i>																						
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 SECRETARY OF STATE  
 STATE OF IDAHO

## INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

- 1.) Please pay special attention to the mailing address. If it is incorrect, please make the appropriate corrections.  
**NOTE:** The name of the business entity cannot be altered on the annual report form.
- 2.) 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 PHYSICAL ADDRESS. PO Boxes WILL NOT be accepted. If report is for a Limited Liability please refer to #4 below.
- 3.) Corporation: Enter names and addresses of ONLY the president, secretary, and directors in block 4.  
 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.
- 4.) 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.
- 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.  
 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.

IDAHO SECRETARY OF STATE

03/04/1998 09:00  
 CK: 9918 CT: 95132 BH: 87368

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