No. C 170692	Reinstatement Annual Report Form ADMIN DISSOLVED 04/09/2008	2. Registered Agent and Office (NOT A P.O. BOX) IRENE D NEWLAND
SECRETARY OF STATE 450 N 4th STREET	1. Mailing Address: Correct in this box if needed.	507 W WATER GROVE DR EAGLE ID 83616
PO BOX 83720 BOISE, ID 83720-0080	IDN, INC. IRENE D NEWLAND -507 W WATER GROVE DR 1110 N. Five Mile Rd. EAGLE ID 83616	3. New Registered Agent Signature.
REINSTATEMENT FEE DUE: \$30.00	Botse, Idaho 83113	
, , , , , , , , , , , , , , , , , , ,	nes and Business Addresses of President, Secretary, Directors ne Street or PO Address ne D. Newland Son W. Wafen Grove D	· · · · · · · · · · · · · · · · · · ·
Director: Ire	ne D. Newland SOT W. Water Gr	ove dr. Eagle ID \$368
		E OF DAY
5. Organized Under the La		
IDAHO	Signature: Trum D. Thus	land Date: 5/4/08
C 170692	Name (type or print): X Trene D	Newland Title President
Issued 04/29/2008 by NLB		

## INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

**Block 1:** Pay special attention to the mailing address. If the correct 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 <u>new</u> registered agent must sign in Block 3.

Block 4: Enter names and business addresses of president, secretary, and directors. Note: Do not put "same as last year" or "same as above". These will not be accepted.

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.