

No. W 73650	Reinstatement Annual Report Form ADMIN DISSOLVED 07/08/2010		2. Registered Agent and Office (NOT A P.O. BOX)	
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. HOME GUARD LLC		STEVE CUNNINGHAM 160 CHERRY LN TWIN FALLS ID 83301	
	PO BOX 182 POCATELLO ID 83204		3. <u>New</u> Registered Agent Signature.	
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members.				
Office Held	Name	Street or PO Address	City	State Country Postal Code
manager	Carol Cunningham	P.O. Box 182	Pocatello ID	USA 83204
manager	Casey Nielsen	2072 Beth St.	Pocatello ID	USA 83201
5. Organized Under the Laws of: 6.				
IDAHO W 73650		Signature: 	Date: 8-19-10	
		Name (type or print): Casey R. Nielsen	Title: Manager	
Issued 08/12/2010 by SLD				

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM