

REINSTATEMENT

No. C 142337	Annual Report Form ADMIN DISSOLVED 04/07/2004		2. Registered Agent and Office NOT A P.O. BOX MR KIM R PEARSON 452 E SUNNYSIDE RD SANDPOINT, ID 83864	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 FEE DUE \$30.00	1. Mailing Address <small>Correct in this box, if applicable</small> TIMBER RIDGE PROGRAM, INC. MR KIM R PEARSON 452 E SUNNYSIDE RD SANDPOINT, ID 83864		3. New registered agent signature	
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)				
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u> <u>Zip</u>
DIRECTOR	MARK SCOTT	301 TIMBER RIDGE	CLARK FORK	IDAHO 83811
DIRECTOR	CINDY SCOTT	301 TIMBER RIDGE	CLARK FORK	IDAHO 83811
DIRECTOR	KIM PEARSON	452 EAST SUNNYSIDE RD.	SANDPOINT	IDAHO 83864
DIRECTOR	MARCIA PEARSON	452 EAST SUNNYSIDE RD.	SANDPOINT	IDAHO 83864
5. Organized under the laws of: IDAHO C 142337		6. Signature <u><i>Kim R. Pearson</i></u> Date <u>15 JULY 2004</u> Name <small>(Typed or Printed)</small> <u>KIM R. PEARSON</u> Title <u>DIRECTOR</u>		

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