No. <b>C 210626</b> Return to:	Reinstatement Annual Report Form ADMIN DISSOLVED 10/27/2017  2. Registered Agent and Office (NOT A P.O. BOX) PAUL F SWENSON
SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed.  CHARTER VENTURES, INC. PAUL F SWENSON 1343 S LINCOLN AVE JEROME ID 83338
	3. New Registered Agent Signature.
REINSTATEMENT FEE	
DUE: \$30.00	
Office Held President Vice President Secretary Treasurer	Name Street or PO Address  City State Country Postal Code  Faul Sazuson 17435 Lincoln file Jame From FD Jerone 67338  Amic Surenson  In
5. Organized Under the La	
IDAHO	Signature: Date: 11/1/2/27
C 210626	Name (type or print): Title:
	Paul Sevenson President
Issued 11/02/2017 by 1L1	

## INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

**Block 1:** Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct mailing 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 new registered agent must sign in Block 3.

Block 4: Enter names and business addresses of president, secretary, and directors. Note: <u>DO NOT</u> put "same as last year" or "same as above". These will not be accepted. Changes here will not affect the address in Block 1. If more space is needed