

| No. C 154637 | Reinstatement Annual Report Form ADMIN DISSOLVED 08/25/2015 | | 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 | 1. Mailing Address: Correct in this box if needed. RYWEST HOMES, INC. TIM DAVIS 125 BEECH ST FRUITLAND ID 83619 USA | | LISA DAVIS 125 BEECH ST FRUITLAND ID 83619 | | | | | | | | | | | | | | | | | | | | | |
| REINSTATEMENT FEE DUE: \$30.00 | | | 3. <u>New</u> Registered Agent Signature. | | | | | | | | | | | | | | | | | | | | | |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres. | | | | | | | | | | | | | | | | | | | | | | | | |
| <table border="1"> <thead> <tr> <th>Office Held</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Lisa Davis</td> <td>125 Beech St</td> <td>Fruitland</td> <td>ID</td> <td></td> <td>83619</td> </tr> <tr> <td>Vice President</td> <td>Tim Davis</td> <td></td> <td>"</td> <td></td> <td></td> <td></td> </tr> </tbody> </table> | | | | Office Held | Name | Street or PO Address | City | State | Country | Postal Code | President | Lisa Davis | 125 Beech St | Fruitland | ID | | 83619 | Vice President | Tim Davis | | " | | | |
| Office Held | Name | Street or PO Address | City | State | Country | Postal Code | | | | | | | | | | | | | | | | | | |
| President | Lisa Davis | 125 Beech St | Fruitland | ID | | 83619 | | | | | | | | | | | | | | | | | | |
| Vice President | Tim Davis | | " | | | | | | | | | | | | | | | | | | | | | |
| 5. Organized Under the Laws of: IDAHO C 154637 | 6. Signature:  Name (type or print): Tim Davis | | Date: 8/29/15 Title: Vice President | | | | | | | | | | | | | | | | | | | | | |
| Issued 08/29/2015 by online | | | | | | | | | | | | | | | | | | | | | | | | |

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM