

| No. <b>C 85013</b>   | <b>Reinstatement Annual Report Form</b><br><b>ADMIN DISSOLVED 01/06/2009</b>  |  | 2. Registered Agent and Office<br><b>(NOT A P.O. BOX)</b>   |             |         |                      |      |       |         |             |            |             |                 |             |       |  |       |          |             |             |       |       |  |       |           |                   |               |          |       |  |       |
|--|---|--|---|-------------|---------|----------------------|------|-------|---------|-------------|------------|-------------|-----------------|-------------|-------|--|-------|----------|-------------|-------------|-------|-------|--|-------|-----------|-------------------|---------------|----------|-------|--|-------|
| Return to:<br>SECRETARY OF STATE<br>450 N 4th STREET<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>REINSTATEMENT FEE</b><br><b>DUE: \$30.00</b>  | 1. Mailing Address: Correct in this box if needed.<br>IDAHO TRAPSHOOTING HALL OF FAME, INC.<br><del>WILLIAM SHRIVER</del> <i>Kathleen McCulley</i><br><del>1028 ELM DR</del> <i>1703 PROSPECT</i><br><del>ST MARIES ID 83861</del> <i>LEWISTON ID 83501</i> |  | <del>WILLIAM SHRIVER</del><br><del>1028 ELM ST</del><br><del>ST MARIES ID 83861</del> <i>Kathleen McCulley</i><br><i>1703 Prospect</i><br><i>Lewiston Idaho 83501</i><br><br>3. New Registered Agent Signature.<br><i>Kathleen McCulley</i> |             |         |                      |      |       |         |             |            |             |                 |             |       |  |       |          |             |             |       |       |  |       |           |                   |               |          |       |  |       |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors and (optional) Treasurer.<br><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>Mark KURRUK</td> <td>527 So State St</td> <td>Grangeville</td> <td>IDAHO</td> <td></td> <td>83530</td> </tr> <tr> <td>Director</td> <td>Kent Harris</td> <td>3717 Custer</td> <td>Boise</td> <td>Idaho</td> <td></td> <td>83705</td> </tr> <tr> <td>Sec/Treas</td> <td>Kathleen McCulley</td> <td>1703 Prospect</td> <td>Lewiston</td> <td>Idaho</td> <td></td> <td>83501</td> </tr> </tbody> </table> |   |  |   | Office Held | Name    | Street or PO Address | City | State | Country | Postal Code | President: | Mark KURRUK | 527 So State St | Grangeville | IDAHO |  | 83530 | Director | Kent Harris | 3717 Custer | Boise | Idaho |  | 83705 | Sec/Treas | Kathleen McCulley | 1703 Prospect | Lewiston | Idaho |  | 83501 |
| Office Held  | Name  | Street or PO Address   | City  | State       | Country | Postal Code          |      |       |         |             |            |             |                 |             |       |  |       |          |             |             |       |       |  |       |           |                   |               |          |       |  |       |
| President:   | Mark KURRUK   | 527 So State St  | Grangeville   | IDAHO       |         | 83530                |      |       |         |             |            |             |                 |             |       |  |       |          |             |             |       |       |  |       |           |                   |               |          |       |  |       |
| Director   | Kent Harris   | 3717 Custer  | Boise   | Idaho       |         | 83705                |      |       |         |             |            |             |                 |             |       |  |       |          |             |             |       |       |  |       |           |                   |               |          |       |  |       |
| Sec/Treas  | Kathleen McCulley   | 1703 Prospect  | Lewiston  | Idaho       |         | 83501                |      |       |         |             |            |             |                 |             |       |  |       |          |             |             |       |       |  |       |           |                   |               |          |       |  |       |
| 5. Organized Under the Laws of:<br><br><b>IDAHO</b><br><b>C 85013</b>  |   | 6.<br>Signature: <i>Kathleen McCulley</i> Date: <i>9/20/12</i><br>Name (type or print): <i>KATHLEEN MCCULLEY</i> Title: <i>Secretary Treasurer</i> |   |             |         |                      |      |       |         |             |            |             |                 |             |       |  |       |          |             |             |       |       |  |       |           |                   |               |          |       |  |       |

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### 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.