

<p>No. C 154377</p> <p>Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080</p> <p>REINSTATEMENT FEE DUE: \$30.00</p>	<p>Reinstatement Annual Report Form ADMIN DISSOLVED 07/08/2010</p> <p>1. Mailing Address: Correct in this box if needed.</p> <p>HARMONY PSR SERVICES, INC. DAWN M FLETCHER 420 MAIN AVE SOUTH TWIN FALLS ID 83301</p>	<p>2. Registered Agent and Office (NOT A P.O. BOX) DAWN FLETCHER 420 MAIN AVE SOUTH TWIN FALLS ID 83301</p> <p>3. <u>New</u> Registered Agent Signature.</p>														
<p>4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors and (optional) Treasurer.</p> <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>Executive Director</td> <td>Dawn Fletcher</td> <td>420 Main Ave S.</td> <td>Twin Falls</td> <td>ID</td> <td>US</td> <td>83301</td> </tr> </tbody> </table>			Office Held	Name	Street or PO Address	City	State	Country	Postal Code	Executive Director	Dawn Fletcher	420 Main Ave S.	Twin Falls	ID	US	83301
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<p>5. Organized Under the Laws of:</p> <p>IDAHO C 154377</p>	<p>6.</p> <p>Signature: <u><i>Dawn Fletcher</i></u> Date: <u>7/19/10</u></p> <p>Name (type or print): <u>Dawn Fletcher</u> Title: <u>Ex. Dir.</u></p>															
<p>Issued 07/19/2010 by CLH</p>																

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Pay special attention to the mailing address. If the correct address is not given in Block 1, strike it out and write in the