FILED EFFECTIVE

No. C 74851	Reinstatement Annual Report Form ADMIN DISSOLVED 04/09/2008 1. Mailing Address: Correct in this box if needed. MOORE RANCHES, INC. LOWELL C MOORE De Cea Sed	2. Registered Agent and Office (NOT A P.O. BOX) JAMES L MOORE 676 NORTH 2700 EAST ROBERTS ID 83444
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080		
REINSTATEMENT FEE DUE: \$30.00	PO BOX 207 ROBERTS ID 83444 676 N 2700 E Roberto, Qd 83444	3. <u>New</u> Registered Agent Signature.
4. Corporations: Enter Name Office Held Name	es and Business Addresses of President, Secretary, Directors a e Street or PO Address	and(optional) Treasurer. City State Country Postal Code
President: Jame Viu President phas Secretary: Caro	/1	oberts Id Jefferson 83444 by Id Jefferson 83442 ets Id Jefferson 83444
5. Organized Under the Law	5 of: 6.	
IDAHO C 74851	Name (type or print): JAMES L MOD	Re Date: 3/14/2000
Issued 02/17/2010 by SLD		

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 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: Do not put "same as last year" or "same as above". These will not be accepted.**

Block 5: May not be altered through the use of this form.

Block 6: The annual report must be signed by a person authorized to represent the corporation. Print or type the name of the signer below the signature.