

No. C 162443	Reinstatement Annual Report Form ADMIN DISSOLVED 12/07/2010		2. Registered Agent and Office (NOT A P.O. BOX) DEBY BARRINGTON 575 JENSEN GROVE WEST MARK CREDIT UNION BLACKFOOT ID 83221	
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. BINGHAM COUNTY PROJECT SAFE PLACE, INC. ROBIN NELSON WEST MARK CREDIT UNION PO BOX 826 BLACKFOOT ID 83221 USA		3. <u>New</u> Registered Agent Signature.	

4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors and (optional) Treasurer.						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
President	Josephine Thyberg	P.O. Box 826	Blackfoot	ID	US	83221
V. Pres.	Susan Nalley	P.O. Box 826	Blackfoot	ID	US	83221
Secretary	Pat Colman	P.O. Box 826	Blackfoot	ID	US	83221
Director	Robin Nelson	P.O. Box 826	Blackfoot	ID	US	83221

5. Organized Under the Laws of: IDAHO C 162443	6. <table style="width: 100%; border: none;"> <tr> <td style="border-bottom: 1px solid black; width: 70%;">Signature: <i>Robin Nelson</i></td> <td style="border-bottom: 1px solid black; width: 30%;">Date: 1-25-11</td> </tr> <tr> <td style="border-bottom: 1px solid black;">Name (type or print): Robin Nelson</td> <td style="border-bottom: 1px solid black;">Title: Director</td> </tr> </table>	Signature: <i>Robin Nelson</i>	Date: 1-25-11	Name (type or print): Robin Nelson	Title: Director
Signature: <i>Robin Nelson</i>	Date: 1-25-11				
Name (type or print): Robin Nelson	Title: Director				

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