

<p>No. L 2679</p> <p>Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080</p> <p><b>REINSTATEMENT FEE</b> <b>DUEDUE: \$30.00</b></p>	<p><b>Reinstatement Annual Report Form</b> <b>ADMIN TERMINATED 04/10/2007</b></p> <p><b>1. Mailing Address: Correct in this box if needed.</b> ORCA POINT ASSOCIATES, AN IDAHO LIMITED PARTNERSHIP MARTY D FRANTZ 9493 GOVERNMENT WAY STE A-1 HAYDEN ID 83835-907 N Lincoln St Post Falls ID 83854</p>	<p><b>2. Registered Agent and Office (NOT A P.O. BOX)</b> MARTY D FRANTZ 9493 GOVERNMENT WAY STE A-1 HAYDEN ID 83835- 11505 W Prairie Ave Post Falls ID 83854</p> <p><b>3. New Registered Agent Signature.</b></p>														
<p><b>4. Limited Partnerships: Enter Names and Business Addresses of general partners.</b></p> <table border="1"> <thead> <tr> <th>General Partners</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>Marty D Frantz</td> <td></td> <td>11505 Wprairie</td> <td>Post Falls</td> <td>ID</td> <td></td> <td>83854</td> </tr> </tbody> </table>			General Partners	Name	Street or PO Address	City	State	Country	Postal Code	Marty D Frantz		11505 Wprairie	Post Falls	ID		83854
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Marty D Frantz		11505 Wprairie	Post Falls	ID		83854										
<p><b>5. Organized Under the Laws of:</b></p> <p><b>IDAHO</b> <b>L 2679</b></p>	<p><b>6.</b></p> <p>Signature: <u>M D Frantz</u></p> <p>Name (type or print): <u>Marty Frantz</u></p> <p>Date: <u>3-13-14</u></p> <p>Title: <u>GP</u></p>															

Issued 03/13/2014 by online

## **INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM**