

No. C 201513		Reinstatement Annual Report Form ADMIN DISSOLVED 06/12/2015		2. Registered Agent and Office (NOT A P.O. BOX) LORI R SHAFER 1138 A HWY 93 ROGERSON ID 83302	
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. SHOSHONE BASIN RANGELAND FIRE PROTECTION ASSOCIATION, INCORPORATED LORI R SHAFER 1138 A HWY 93 ROGERSON ID 83302		3. New Registered Agent Signature.	
REINSTATEMENT FEE DUE: \$30.00					
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres.					
Office Held	Name	Street or PO Address	City	State	Country
Chairperson	Lori Shafer	1138 A Hwy 93	Rogerston	Id	US
Secretary/Treasur	Sharon Leibauer	4838 E. 3425 N.	Murtaugh	Id	US
Director	Wyatt Williams	2725 N. 3000 E.	Twin Falls	Id	US
Director	Wes Panter	1935 E. 200 N.	Twin Falls	Id	US
Director	Todd Lanting	2181 N. 2300 E.	Twin Falls	Id	US
Director	Tom Garrison	3341 N. 1500 E.	Buhl	Id	US
5. Organized Under the Laws of:		6.			
IDAHO C 201513		Signature: <u>Lori Shafer</u> Name (type or print): <u>Lori Shafer</u>			
		Date: <u>July 6, 2015</u> Title: <u>July 6, 2015</u>			

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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.

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.**