

No. W 119456	Reinstatement Annual Report Form ADMIN DISSOLVED 02/14/2014		2. Registered Agent and Office (NOT A P.O. BOX) ROBERT SHORT 9273 W DRIFTWOOD DR COEUR D ALENE ID 83814																																			
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. RETIREMENT HOMES AND SERVICES, LLC ROBERT SHORT 9273 W DRIFTWOOD DR COEUR D ALENE ID 83814		3. <u>New</u> Registered Agent Signature.																																			
REINSTATEMENT FEE DUE: \$30.00																																						
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. <table border="1"> <thead> <tr> <th>Manager or Member</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>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>Bob Short</td> <td>9273 W Driftwood</td> <td>Coeur d'Alene</td> <td>ID</td> <td></td> <td>83814</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Bob Short	9273 W Driftwood	Coeur d'Alene	ID		83814	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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5. Organized Under the Laws of: IDAHO W 119456	6. Signature: <u>Bob Short</u> Date: <u>3/20/15</u> Name (type or print): <u>Bob Short</u> Title: <u>President</u>																																					

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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM