

REINSTATEMENT

No. C 126447	Annual Report Form ADMIN DISSOLVED 02/09/2001		2. Registered Agent and Office NOT A P.O. BOX	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 FEE DUE \$30.00	1. Mailing Address - Correct in this box if applicable ASSOCIATION FOR EQUINE DENTAL EQUI PO BOX 32 1040 GOODING, ID 83330 <i>Glenns Ferry ID 83623</i>		LOUIS DALE JEFFREY 415 E 4TH AVE x <i>Glenns Ferry, ID 83623</i> FEB 16 AM 10:21 Glenns Ferry STATE 3. New registered agent <i>IDAHO</i> STATE OF IDAHO	
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of ☐ Managers or ☐ Members (check one)				
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>
Director	Randy Riedinger	17110 Evergreen Road	Cottonwood	CA 96022
Director	Casey Jones	P.O. Box 118	Glenns Ferry	ID 83623
Director	Dawn Crawford	6505 Butte	Boise	ID 83704
Director	Louis Dale Jeffrey	P.O. Box 1040	Glenns Ferry	ID 83623
5. Organized under the laws of: IDAHO C 126447		6. <i>[Signature]</i> Signature _____ Date 2/14/2001 Name (Typed or Printed) Louis Dale Jeffrey Title Director		

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