

FILED EFFECTIVE

No. C 101955	Reinstatement Annual Report Form ADMIN DISSOLVED 07/05/2002		2. Registered Agent and Office (NOT A P.O. BOX) MARSHA FAIRES now Wilson HCI BOX 15 NEZPERCE ID 83543	
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. CRAIG MOUNTAIN ENTERPRISES, LTD. MARSHA FAIRES now Wilson HCI BOX 15 NEZPERCE ID 83543 Marsha Wilson 22 N. Bridge St., St. Anthony, ID 83445		22 N. Bridge St. St. Anthony, ID 83445 3. New Registered Agent Signature: <i>Marsha Wilson</i>	
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	Marsha Wilson	22 N. Bridge St.	St. Anthony ID	Fremont 83445
Secretary	Daniel Brannon	22 N. Bridge St.	St. Anthony, ID	Fremont 83445
5. Organized Under the Laws of: 6.				
IDAHO C 101955		Signature: <i>Marsha Wilson</i> Name (type or print): Marsha Wilson		Date: 30 Sep 2009 Title: President
Issued 03/11/2010 by PEH				