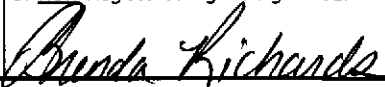


No. C 184908	Reinstatement Annual Report Form ADMIN DISSOLVED 01/24/2017		2. Registered Agent and Office (NOT A P.O. BOX)																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed. OWYHEE INITIATIVE, INC. 1577 N LINDER #323 P.O. Box 103 KUNA ID 83634 Murphy, ID 83650		MITCH JAURENA 7776 S OLD FARM LANE MERIDIAN ID 83687 Brenda Richards 8935 Whiskey Mt. Rd Murphy, ID 83650																																			
REINSTATEMENT FEE DUE: \$30.00			3. <u>New Registered Agent Signature.</u> 																																			
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres. <table border="1"> <thead> <tr> <th>Office Held</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>Chairman</td> <td>Brenda Richards</td> <td>8935 Whiskey Mt Rd.</td> <td>Murphy, ID</td> <td>ID</td> <td></td> <td>83650</td> </tr> <tr> <td>Vice-Chairman</td> <td>Craig Gehrke</td> <td>950 W. Bannock St., Suite 605</td> <td>Boise, ID</td> <td>ID</td> <td></td> <td>83702</td> </tr> <tr> <td>Secretary</td> <td>Dennis Stanford</td> <td>P.O. Box 167</td> <td>Jordan Valley, OR</td> <td>OR</td> <td></td> <td>97910</td> </tr> <tr> <td>Treasurer</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Office Held	Name	Street or PO Address	City	State	Country	Postal Code	Chairman	Brenda Richards	8935 Whiskey Mt Rd.	Murphy, ID	ID		83650	Vice-Chairman	Craig Gehrke	950 W. Bannock St., Suite 605	Boise, ID	ID		83702	Secretary	Dennis Stanford	P.O. Box 167	Jordan Valley, OR	OR		97910	Treasurer						
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5. Organized Under the Laws of: IDAHO C 184908	6.  Signature: Name (type or print): <u>Brenda Richards</u> Date: <u>2-17-17</u> Title: <u>Chairman</u>																																					
Issued 02/20/2017 by online																																						

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM