


# REINSTATEMENT

No. <b>C 131099</b>	<b>Annual Report Form</b> ADMIN DISSOLVED 02/05/2003	2. Registered Agent and Office <b>NOT A P.O. BOX</b>																		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>FEE DUE \$30.00</b>	1. Mailing Address: (Correct in this box, if applicable)  FANATICS, INC.  2040 CHANNING WAY  IDAHO FALLS, ID 83404	ROGER S RAYMOND 1900 BALBOA DR  IDAHO FALLS, ID 83404  3. <u>New</u> registered agent signature																		
4. Corporations: Enter Names and Business Addresses of <b>President, Secretary and Directors</b> Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> <b>Managers</b> or <input type="checkbox"/> <b>Members</b> (check one)																				
<table border="0"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>PRESIDENT</td> <td>TIMOTHY MUELLER</td> <td>1691 9th St.</td> <td>idaho Falls</td> <td>ID</td> <td>83404</td> </tr> <tr> <td>SECRETARY</td> <td>MARY MUELLER</td> <td>1691 9th St.</td> <td>Idaho Falls</td> <td>ID</td> <td>83404</td> </tr> </tbody> </table>			<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	PRESIDENT	TIMOTHY MUELLER	1691 9th St.	idaho Falls	ID	83404	SECRETARY	MARY MUELLER	1691 9th St.	Idaho Falls	ID	83404
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SECRETARY	MARY MUELLER	1691 9th St.	Idaho Falls	ID	83404															
5. Organized under the laws of: IDAHO C 131099	6. Signature  Date _____ Name (Typed or Printed) <u>Timothy Mueller</u> Title <u>President</u>																			