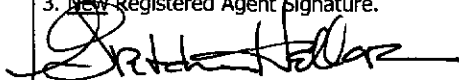


No. C 100157	Reinstatement Annual Report Form ADMIN DISSOLVED 02/08/2012		2. Registered Agent and Office (NOT A P.O. BOX) SUSAN TRAVER 1309 LARCH SANDPOINT ID 83864 Gretchen Hellar 401 ST. Clair Sandpoint, ID 83864																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. BONNER COUNTY HUMAN RIGHTS TASK FORCE, INCORPORATED SUSAN J TRAVER P.O. Box 1463 1309 LARCH SANDPOINT ID 83864		3. New Registered Agent Signature. 																																			
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres.																																						
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Office Held</th> <th style="width: 20%;">Name</th> <th style="width: 25%;">Street or PO Address</th> <th style="width: 10%;">City</th> <th style="width: 10%;">State</th> <th style="width: 10%;">Country</th> <th style="width: 10%;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>PRESIDENT</td> <td>Brenda Hammond</td> <td>300 Evergreen Sage</td> <td>ID</td> <td>Bonner</td> <td></td> <td>83860</td> </tr> <tr> <td>Vice President</td> <td>Laura Brey</td> <td>313 Pine St.</td> <td>Sandpoint</td> <td>ID</td> <td>Bonner</td> <td>83864</td> </tr> <tr> <td>Secretary</td> <td>Donna Brundage</td> <td>1820 Hickory</td> <td>ID</td> <td>Bonner</td> <td></td> <td>83864</td> </tr> <tr> <td>Treasurer</td> <td>GRETCHEN Hellar</td> <td>401 ST Clair</td> <td>Sandpoint</td> <td>ID</td> <td>Bonner</td> <td>83864</td> </tr> </tbody> </table>				Office Held	Name	Street or PO Address	City	State	Country	Postal Code	PRESIDENT	Brenda Hammond	300 Evergreen Sage	ID	Bonner		83860	Vice President	Laura Brey	313 Pine St.	Sandpoint	ID	Bonner	83864	Secretary	Donna Brundage	1820 Hickory	ID	Bonner		83864	Treasurer	GRETCHEN Hellar	401 ST Clair	Sandpoint	ID	Bonner	83864
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5. Organized Under the Laws of: IDAHO C 100157		6. Signature:  Name (type or print): GRETCHEN HELLAR Date: <u>10-25-2012</u> Title: <u>Treas</u>																																				

Issued 10/19/2012 by SLD

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM