FILED EFFECTIVE

## REINSTATEMENT

No. <b>C</b> 156983		Annual Report Form ADMIN DISSOLVED 01/09/2007			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	Mailing Address - Correct in this box, if applicable			EDWARD J MASON 4015 W CAMAS 1982 N WILD			
	EDWA	TED MASON SIGNATURE HOMES, INC. EDWARD J MASON 4015 W SAMAB 1883 N WILLWOOD STREET			BOISE, ID 83765- 82717		
FEE DUE \$30.00		BOISE, ID 82705-83713			3. <u>New</u> registered agent signature		
4. Corporations: Enter Names and Limited Liability Companies: En Limited and Limited Liability Proffice held Name Owner ICEO Education    Owner ICEO E	iter Names and irtnerships: Enti	Addresses of manager names and addresses or P.C. Street or P.C.	ement. sses of at least two (2) D. Address	partners.	city Boise	State	Zp 83713
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5. Organized under the laws of: IDAHO C 156983		6. Signature	Shigat		Date _	7/12/07 Controller	
		Name (Typed or Printed)	Shari S.	Shari S. Panter			
Issued 07/12/2007 by S	LD				<del></del>		

## INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

- Block 1: Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. Note: To ensure future mailings, the corrected address must be inside Block 1.
- Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. Note:

  The office of the registered agent must be at a street address in Idaho; not a Post Office Box or Personal Mail Box.
- Block 3: Only a new registered agent must sign in Block 3.
- Block 4: Enter names and business addresses of president, secretary, and directors (for corporations only), management (for LLCs only), or at least two (2) partners (for LPs and LLPs only. Note: Putting "same as last year" or "same as above" will not be accepted.
- Block 5: May not be altered through the use of this form.
- Block 6: The angual report print by signed by 2.78700 authorized to represent the corporation/LLC/LP/LLP. Print or type the name arreceived. Time 2.45PMe.