FILED EFFECTIVE

No. C 73019	Reinstatement Annual Report Form ADMIN DISSOLVED 09/23/2014	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.** ALBERT W. JARDINE CHAPTER 22, DISABLED AMERICAN VETERANS DEPARTMENT OF IDAHO, ~~BRIAN L ALSPACH~~ ~~1703 WARREN~~ ~~BOISE ID 83706~~ HARVEY DIXON 529 W. ELWOOD DR BOISE, ID 83706	MARLIN J LEWIS 6917 SUNNYBROOK DR BOISE ID 83709-1949
REINSTATEMENT FEE **DUE:** $30.00		3. New Registered Agent Signature.

4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres.

Office Held	Name	Street or PO Address	City	State	Country	Postal Code
Pres/ADJutant	MARLIN LEWIS	6917 SUNNYBROOK DR	BOISE	ID	USA	83709-1949

5. Organized Under the Laws of:	6. Signature:	Date:
IDAHO C 73019	Marlin J Lewis	10/10/14
	Name (type or print): Marlin Lewis	Title: ADJutant

Issued 10/10/2014 by JL1