

No. C 175073	Reinstatement Annual Report Form ADMIN DISSOLVED 12/07/2010	2. Registered Agent and Office (NOT A P.O. BOX) 3-BRANDON BIRD <i>Michelle Holt</i> 167 W BRIDGE ST <i>PO Box 451</i> BLACKFOOT ID 83221 <i>1255 W Hwy 39</i> <i>Blackfoot, ID 83221</i>																																																																
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. EASTERN IDAHO ECONOMIC DEVELOPMENT PARTNERS, INC. PO BOX 1435 <i>PO Box 451</i> BLACKFOOT ID 83221	3. <u>New</u> Registered Agent Signature. <i>Michelle Holt</i>																																																																
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors and (optional) Treasurer.																																																																		
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Office Held</th> <th style="text-align: left;">Name</th> <th style="text-align: left;">Street or PO Address</th> <th style="text-align: left;">City</th> <th style="text-align: left;">State</th> <th style="text-align: left;">Country</th> <th style="text-align: left;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Kristen Jensen</td> <td>550 N Oregon Trail</td> <td>American Falls</td> <td>ID</td> <td>Power</td> <td>83211</td> </tr> <tr> <td>VP</td> <td>Jolie Turek</td> <td>PO Box 758</td> <td>Challis</td> <td>ID</td> <td>Custer</td> <td>83226</td> </tr> <tr> <td>Secy Treasurer</td> <td>Michelle Holt</td> <td>PO Box 46</td> <td>Arco</td> <td>ID</td> <td>Butte</td> <td>83213</td> </tr> <tr> <td>Director</td> <td>Gynii Gilliam</td> <td>1651 Alvin Ricken</td> <td>Pocatello</td> <td>ID</td> <td>Bannock</td> <td>83201</td> </tr> <tr> <td>Director</td> <td>Kathy Ray</td> <td>PO Box 32</td> <td>Malad</td> <td>ID</td> <td>Oneida</td> <td>83252</td> </tr> <tr> <td>Director</td> <td>Kerri Ellis</td> <td>PO Box 205</td> <td>Duboise</td> <td>ID</td> <td>Clark</td> <td>83423</td> </tr> <tr> <td>Director</td> <td>Linda Martin</td> <td>151 N Ridge</td> <td>Idaho Falls</td> <td>ID</td> <td>Bonneville</td> <td>83402</td> </tr> <tr> <td>Director</td> <td>Tammy Stringham</td> <td>803 Monroe</td> <td>Salmon</td> <td>ID</td> <td>Lemhi</td> <td>83467</td> </tr> </tbody> </table>	Office Held	Name	Street or PO Address	City	State	Country	Postal Code	President	Kristen Jensen	550 N Oregon Trail	American Falls	ID	Power	83211	VP	Jolie Turek	PO Box 758	Challis	ID	Custer	83226	Secy Treasurer	Michelle Holt	PO Box 46	Arco	ID	Butte	83213	Director	Gynii Gilliam	1651 Alvin Ricken	Pocatello	ID	Bannock	83201	Director	Kathy Ray	PO Box 32	Malad	ID	Oneida	83252	Director	Kerri Ellis	PO Box 205	Duboise	ID	Clark	83423	Director	Linda Martin	151 N Ridge	Idaho Falls	ID	Bonneville	83402	Director	Tammy Stringham	803 Monroe	Salmon	ID	Lemhi	83467	5. Organized Under the Laws of: <div style="text-align: center; border: 1px solid black; padding: 5px;"> IDAHO C 175073 </div>		6. Signature: <i>Michelle Holt</i> Date: <i>6/14/11</i> Name (type or print): <i>Michelle M. Holt</i> Title: <i>Treasurer</i>
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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Pay special attention to the mailing address. If the correct 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. **Note:** Do not put "same as last year" or "same as above". **These will not be accepted.**

Block 5: May not be altered through the use of this form.

Block 6: The annual report must be signed by a person authorized to represent the corporation. Print or type the name of the signer below the signature.