

No. C 144705	Reinstatement Annual Report Form ADMIN DISSOLVED 10/15/2014		2. Registered Agent and Office (NOT A P.O. BOX) PATRICK WHITCOMB 5504 MICA VIEW RD COEUR D'ALENE ID 83814 16829 S. Basalt														
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. NORTH IDAHO WRESTLING CAMP, INC. PATRICK WHITCOMB 5504 MICA VIEW RD PO Box 2999 COEUR D'ALENE ID 83816		3. <u>New</u> Registered Agent Signature.														
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres. <table border="1"> <thead> <tr> <th>Office Held</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Patrick Whitcomb</td> <td>PO Box 2999</td> <td>Coeur d'Alene</td> <td>ID</td> <td>USA</td> <td>83816</td> </tr> </tbody> </table>				Office Held	Name	Street or PO Address	City	State	Country	Postal Code	President	Patrick Whitcomb	PO Box 2999	Coeur d'Alene	ID	USA	83816
Office Held	Name	Street or PO Address	City	State	Country	Postal Code											
President	Patrick Whitcomb	PO Box 2999	Coeur d'Alene	ID	USA	83816											
5. Organized Under the Laws of: IDAHO C 144705	6. Signature:  Name (type or print): Patrick Whitcomb			Date: 1-27-15 Title: President													

Issued 01/17/2015 by online

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM