No. C 169761	Reinstatement Annual Report Form	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	ADMIN DISSOLVED 02/08/2012 1. Mailing Address: Correct in this box if needed. IDAHO CONCERNED AREA RESIDENTS FOR THE ENVIRONMENT (I.C.A.R.E.), INCORPORATED ALMA HASSE PO BOX 922 FRUITLAND ID 83619-0922 USA	ALMA HASSE 2945 1ST LANE EAST PARMA ID 83660-0152
REINSTATEMENT FEE DUE: \$30.00	TROTTERIO ID 03013 0322 03A	3. <u>New</u> 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 TREASURER Alma Hasse P.O.BOL 922, FRUITAND ED 83619-0922 STEREMARY TINA FISHER BO. POT 922, FRUITLAND ED 83619-0922 PRESIDENT BRYAN WALLER POBOL 922, FRUITLAND ED 83619-0922		
5. Organized Under the La IDAHO C 169761	ws of: Signature: Name (type or print):	Date: 3/13/204 Title:

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Issued 03/13/2014 by DK1