


No. C 202381	Reinstatement Annual Report Form ADMIN DISSOLVED 09/22/2015		2. Registered Agent and Office (NOT A P.O. BOX) ARMOND C FRASCA III 2699 E PACKSADDLE DR COEUR D ALENE ID 83815																				
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. NW CLASSIC TACKLE, INC. ARMOND C FRASCA III 2699 E PACKSADDLE DR COEUR D ALENE ID 83815		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>ARMOND C FRASCA III</td> <td rowspan="4">9751 N. GOWN WAY #8 HAYDEN, ID</td> <td rowspan="4">ID</td> <td rowspan="4">83835</td> <td rowspan="4"></td> <td rowspan="4"></td> </tr> <tr> <td>V. PRESIDENT</td> <td>CLAUDIA H. FRASCA</td> </tr> <tr> <td>SECRETARY</td> <td>BRITANY A. FRASCA</td> </tr> <tr> <td>TREASURER</td> <td>ARMOND C. FRASCA IV</td> </tr> </tbody> </table>				Office Held	Name	Street or PO Address	City	State	Country	Postal Code	PRESIDENT	ARMOND C FRASCA III	9751 N. GOWN WAY #8 HAYDEN, ID	ID	83835			V. PRESIDENT	CLAUDIA H. FRASCA	SECRETARY	BRITANY A. FRASCA	TREASURER	ARMOND C. FRASCA IV
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TREASURER	ARMOND C. FRASCA IV																						
5. Organized Under the Laws of: IDAHO C 202381	6. Signature:  Name (type or print): <u>ARMOND C. FRASCA III</u>			Date: <u>10/2/15</u> Title: <u>President</u>																			

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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM