

No. C 175700	Reinstatement Annual Report Form ADMIN DISSOLVED 02/24/2017		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. BLACKRIDGE MANAGEMENT GROUP INC. 896 E. HIGHLAND VIEW DR BOISE ID 83702 P.O. BOX 393 MC CALL ID 83638		JEFFREY A WOOD 896 E. HIGHLAND VIEW DR BOISE ID 83702 2602 NORTH 23RD STREET														
REINSTATEMENT FEE DUE: \$30.00			3. New 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></td> <td>Jeffrey A Wood</td> <td>PO Box 393</td> <td>McCall</td> <td>ID</td> <td></td> <td>83638</td> </tr> </tbody> </table>				Office Held	Name	Street or PO Address	City	State	Country	Postal Code		Jeffrey A Wood	PO Box 393	McCall	ID		83638
Office Held	Name	Street or PO Address	City	State	Country	Postal Code											
	Jeffrey A Wood	PO Box 393	McCall	ID		83638											
5. Organized Under the Laws of: IDAHO C 175700	6. Signature: <u>Jeffrey A. Wood</u> Date: <u>3-10-2017</u> Name (type or print): <u>JEFFREY A WOOD</u> Title: <u>PRESIDENT</u>																

Issued 03/10/2017 by online

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM