№. С 48607	Reinstatement Annual Report Form ADMIN DISSOLVED 03/08/2011	2. Registered Agent and Office (NOT A P.O. BOX) WARD MAGUIRE & BYBEE
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.  CHRISTIANSEN IMPLEMENT COMPANY, INC. JOHN HOYBJERG P.O. BOX 369	353 E LANDER POCATELLO ID 83201  3. New Registered Agent Signature.
REINSTATEMENT FEE DUE: \$30.00	AMERICAN FALLS ID 83211	
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors and (optional) Tressurer.  Office Held Name Street or PO Address City State Country Code		
	JOHN HOPBJERL 3690 50 FRME. UALERIE HOYBJERG	mmit, FOCATELLO, ID 83201
5. Organized Under the Law  IDAHO	s of: 6. Signature: a Va	Serg Date:
C 48607	Name (type or print): John Ho	BJERG Title: Pres.
Issued 07/18/2011 by 3L1		

## 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: <u>Do not put "same as last year" or "same as above". These will not be accepted.</u>

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.