


No. C 75939	Reinstatement Annual Report Form ADMIN DISSOLVED 08/07/2012		2. Registered Agent and Office (NOT A P.O. BOX) CHARLENE HUMPHERYS 490 EAST 2ND NORTH MOUNTAIN HOME ID 83647							
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. CEDAR CREST RETIREMENT CENTER, INC. CHARLENE HUMPHERYS 1200 E 6TH S MOUNTAIN HOME ID 83647		3. New Registered Agent Signature.							
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres.										
<table style="width: 100%; border: none;"> <tr> <th style="text-align: left;">Office Held</th> <th style="text-align: left;">Name</th> <th style="text-align: left;">Street or PO Address</th> <th style="text-align: left;">City</th> <th style="text-align: left;">State</th> <th style="text-align: left;">Country</th> <th style="text-align: left;">Postal Code</th> </tr> </table>				Office Held	Name	Street or PO Address	City	State	Country	Postal Code
Office Held	Name	Street or PO Address	City	State	Country	Postal Code				
PRESIDENT CHARLENE HUMPHERYS 1200 E 6TH SOUTH MTN. HOME, ID USA 83647										
VICE PRES. GREG HUMPHERYS 14303 CARIBOU CT CALDWELL, ID USA 83607										
5. Organized Under the Laws of: <div style="text-align: center; font-weight: bold; font-size: 1.2em;">IDAHO</div> <div style="text-align: center; font-weight: bold; font-size: 1.2em;">C 75939</div>		6. <div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> Signature:  Name (type or print): CHARLENE HUMPHERYS </div> <div style="width: 35%;"> Date: 8-28-2012 Title: PRESIDENT </div> </div>								
Issued 08/28/2012 by JL1										