FILED EFFECTIVE

| No. C 155954 | Reinstatement Annual Report Form ADMIN DISSOLVED 11/05/2009 | 2. Registered Agent and Office (NOT A P.O. BOX) |
|--|--|---|
| Return to: | 701 1114 DISSOLVED 11/05/2005 | VALLEY VISTA CARE |
| SECRETARY OF STATE | 1. Mailing Address: Correct in this box if needed. | 820 ELM ST ST MARIES ID 83861 |
| PO BOX 83720 BOISE, ID 83720-0080 | SANDPOINT EXTENDED HOUSING CORPORATION | |
| | LESLIE HIEBERT CEO VALLEY VISTA CARE | 3. New Registered Agent Signature. |
| | 820 ELM ST ST MARIES ID 83861 | |
| REINSTATEMENT FEE DUE: \$30.00 | Sandy Kennelly, CEO | |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors and(optional) Treasurer. | | |
| Office Held Name Street or PO Address City State Country Postal Code | | |
| | | |
| President Bill Cowin 1022 Park Dr. St. Maries, 10A+10 USA 83861 | | |
| Secretary Jean Dohrman 59510 S. Hwy7 St. Maries, 1D Director John Thomson 11185.4th St. Maries, 1083841-USA | | |
| Director John Thomson 11185.4th St. Maries, 1083861-USA | | |
| Director Peg Carver 2301 Cromwell Ave. St. Maries, ID 83801 USA Director Wayne Foxworth 352 Ahrs Loop-St. Maries, ID 83801 USA | | |
| Director Wayne Foxworth 352 Ahrs Loop-St. Maries, ID 83801 | | |
| DITCHOT WELL TO ROOT IT 352 1 C+ MANGE IN 038101- 11814 | | |
| Director Trask Silva Po Box 334 St. Maries, 10 83861- USIA | | |
| | | |
| 5. Organized Under the Laws of: 6. Signature: Date: \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ | | |
| IDAHO | andy yen | nelly |
| C 155954 | Name (type or print): Sandy K | ennelly Title: CEO |
| Issued 11/20/2009 by CLH | | |