

FILED EFFECTIVE

No. C 159912	Reinstatement Annual Report Form ADMIN DISSOLVED 07/11/2012		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. ELITE SYSTEMS, INC. LOREN BAILEY 608 HAWTHORNE P.O. Box 41 KUNA, ID 83634 NAMPALD 83686		LOREN BAILEY 608 HAWTHORNE NAMPALD 83686 439 W Main St Kuna ID 83634																						
REINSTATEMENT FEE DUE: \$30.00			3. New Registered Agent Signature.																						
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors and (optional) Treasurer. <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>Loren Bailey</td> <td>P.O. Box 41</td> <td>Kuna</td> <td>ID</td> <td>USA</td> <td>83634</td> </tr> <tr> <td>Secretary</td> <td>Robin Bailey</td> <td>PO Box 41</td> <td>Kuna</td> <td>ID</td> <td>USA</td> <td>83634</td> </tr> </tbody> </table>					Office Held	Name	Street or PO Address	City	State	Country	Postal Code	President	Loren Bailey	P.O. Box 41	Kuna	ID	USA	83634	Secretary	Robin Bailey	PO Box 41	Kuna	ID	USA	83634
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Secretary	Robin Bailey	PO Box 41	Kuna	ID	USA	83634																			
5. Organized Under the Laws of: IDAHO C 159912		6. Signature:  Name (type or print): <u>Loren Bailey</u> Date: <u>7-18-2012</u> Title: <u>President</u>																							

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