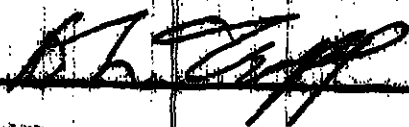


No. C 152243		Reinstatement Annual Report Form ADMIN DISSOLVED 03/08/2011		2. Registered Agent and Office: (NOT A P.O. BOX) DAVID TRAPP 881 S 100 W VICTOR ID 83455																						
Return to: SECRETARY OF STATE 400 N 4th STREET PO BOX 83728 BOISE, ID 83728-0880 REINSTATEMENT FEE DUE: \$30.00		1. Mailing Address: (Correct to this state if needed) D. L. TRAPP WOODWORKS, INC. LAURIE HERDMAN 439 LUPINE VICTOR ID 83455		3. New Registered Agent Signature:																						
A. Corporation: Enter names and business addresses of President, Secretary, Directors and (optional) Treasurer. <table border="1"> <thead> <tr> <th>Office Title</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>PRES</td> <td>DAVID L. TRAPP</td> <td>439 LUPINE, VICTOR ID 83455</td> <td></td> <td>USA</td> <td></td> <td>83455</td> </tr> <tr> <td>VP</td> <td>LAURIE HERDMAN</td> <td>881 S 100 W, VICTOR ID 83455</td> <td></td> <td>USA</td> <td></td> <td>83455</td> </tr> </tbody> </table>						Office Title	Name	Street or PO Address	City	State	Country	Postal Code	PRES	DAVID L. TRAPP	439 LUPINE, VICTOR ID 83455		USA		83455	VP	LAURIE HERDMAN	881 S 100 W, VICTOR ID 83455		USA		83455
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5. Organized Under the laws of: IDAH0 C 152243		6. Signature:  Name (type or print): DAVID L. TRAPP Title: PRES																								

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 2: For special situations for the entities with the following information: