

No. C 172308	Reinstatement Annual Report Form ADMIN DISSOLVED 06/12/2013		2. Registered Agent and Office (NOT A P.O. BOX) TRICIA MIDGLEY 3701 E LAKE FOREST DR BOISE ID 83716
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. TRAIL WIND PARENT TEACHER ORGANIZATION, INC. JENIFER J PFAUTSCH 3701 E LAKE FOREST DR BOISE ID 83716		3. <u>New</u> Registered Agent Signature.
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres.			
Office Held	Name	Street or PO Address	City State Country Postal Code
President 1 V.P. 2 V.P. Secretary Treasurer	Jenifer Pfautsch Julie Cortez Katie Kopel Linda Branson Erin Meeker	5439 S. Paintbrush 5395 Pegasus 4702 Pegasus 6163 Scotchway 3987 E. Alta Ridge ct.	Boise, ID USA 83716 Boise, ID USA 83716 Boise, ID USA 83716 Boise, ID USA 83716 Boise, ID USA 83716
5. Organized Under the Laws of: IDAHO C 172308		6. Signature:  Name (type or print): <u>Jenifer Pfautsch</u> Date: <u>8-5-13</u> Title: <u>President</u>	

Issued 07/01/2013 by SLD

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM