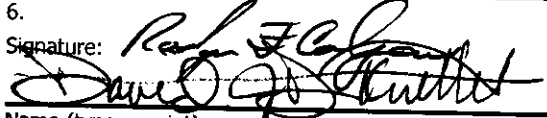


No. C 54397	Reinstatement Annual Report Form ADMIN DISSOLVED 01/14/2013		2. Registered Agent and Office (NOT A P.O. BOX) NELLIE CHASE 124 NEW 6TH ST LEWISTON ID 83501-2081														
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. AREA II COUNCIL ON AGING, INC. NELLIE CHASE 124 NEW 6TH ST LEWISTON ID 83501 USA		3. <u>New</u> Registered Agent Signature.														
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres. <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>Chair</td> <td>Rodger F. Colgan</td> <td>2410 Harmony Heights Road</td> <td>Ortino</td> <td>ID</td> <td>USA</td> <td>83544</td> </tr> </tbody> </table>				Office Held	Name	Street or PO Address	City	State	Country	Postal Code	Chair	Rodger F. Colgan	2410 Harmony Heights Road	Ortino	ID	USA	83544
Office Held	Name	Street or PO Address	City	State	Country	Postal Code											
Chair	Rodger F. Colgan	2410 Harmony Heights Road	Ortino	ID	USA	83544											
5. Organized Under the Laws of: IDAHO C 54397	6. Signature:  Name (type or print): DAVID J.D. Knittel			Date: 5-17-13 Title: ADRC MANAGER													

Issued 04/11/2013 by SLD

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM