

No. C 126756	Reinstatement Annual Report Form ADMIN DISSOLVED 03/30/2015		2. Registered Agent and Office (NOT A P.O. BOX) LIZ CANADY 13181 N EMERALD DR HAYDEN ID 83835														
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. CASCADE IRRIGATION & LANDSCAPING, INC. LIZ CANADY 13181 N EMERALD DR HAYDEN ID 83835																
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>secty, vpres</td> <td>LIZ CANADY</td> <td>13181 N. EMERALD DR</td> <td>HAYDEN</td> <td>ID</td> <td></td> <td>83835</td> </tr> </tbody> </table>			Office Held	Name	Street or PO Address	City	State	Country	Postal Code	secty, vpres	LIZ CANADY	13181 N. EMERALD DR	HAYDEN	ID		83835	3. <u>New</u> Registered Agent Signature.
Office Held	Name	Street or PO Address	City	State	Country	Postal Code											
secty, vpres	LIZ CANADY	13181 N. EMERALD DR	HAYDEN	ID		83835											
5. Organized Under the Laws of: IDAHO C 126756	6. Signature: <i>Liz Canady</i> Name (type or print): LIZ CANADY			Date: 4/7/15 Title: secty													

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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM