No. C 203503	Reinstatement Annual Report Form ADMIN DISSOLVED 12/16/2015	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.** BRIDGE COMMUNITY CENTER INC (THE) TOMMIE LEWIS 8 MCKINLEY AVE KELLOGG ID 83837	TOMMIE LEWIS 8 MCKINLEY AVE KELLOGG ID 83837
REINSTATEMENT FEE DUE: $30.00		3. New 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
Board President	Tommie Lewis	30 Agate St	Kellogg	ID	Shoshone	83837
VP/Secretary	Janice Delke	212 W 9th St	Silverton	ID	shoshone	83867
Treasurer	Lisa Morden	505 Burke Rd	Wallace	ID	Shoshone	83873
member	Jan Tindall	3929 W. Cambridge Ave	Visalia	CA		93277
member	Gene Lewis	30 Agate st	Kellogg	ID	Shoshone	83837

5. Organized Under the Laws of:	6.
IDAHO C 203503	Signature: [signature] Date: 4-25-16 Name (type or print): Tommie Lewis Title: President

Issued 04/25/2016 by SLD

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM