

No. C 97304	Reinstatement Annual Report Form ADMIN DISSOLVED 04/15/2013		2. Registered Agent and Office (NOT A P.O. BOX) SALLE ROBINSON 176 S CAPITOL BLVD BOISE ID 83702																																			
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. INTERIOR DESIGNERS OF IDAHO, INC. SALLE ROBINSON PO BOX 2053 BOISE ID 83701 USA		3. <u>New</u> Registered Agent Signature.																																			
REINSTATEMENT FEE DUE: \$30.00																																						
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>President</td> <td>Katy Hoxey</td> <td>6292 S. Universal Ave</td> <td>Boise</td> <td>ID</td> <td>USA</td> <td>83709</td> </tr> <tr> <td>President-Elect</td> <td>Melody Patton</td> <td>1801 W. Washington St.</td> <td>Boise</td> <td>ID</td> <td>USA</td> <td>83702</td> </tr> <tr> <td>Secretary</td> <td>Laura Knapp</td> <td>176 S. Capitol Blvd</td> <td>Boise</td> <td>ID</td> <td>USA</td> <td>83702</td> </tr> <tr> <td>Treasurer</td> <td>Salle Robinson</td> <td>176 S. Capitol Blvd</td> <td>Boise</td> <td>ID</td> <td>USA</td> <td>83702</td> </tr> </tbody> </table>				Office Held	Name	Street or PO Address	City	State	Country	Postal Code	President	Katy Hoxey	6292 S. Universal Ave	Boise	ID	USA	83709	President-Elect	Melody Patton	1801 W. Washington St.	Boise	ID	USA	83702	Secretary	Laura Knapp	176 S. Capitol Blvd	Boise	ID	USA	83702	Treasurer	Salle Robinson	176 S. Capitol Blvd	Boise	ID	USA	83702
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5. Organized Under the Laws of: IDAHO C 97304	6. Signature: <u>Salle Robinson</u> Date: <u>9-24-13</u> Name (type or print): <u>SALLE ROBINSON</u> Title: <u>treasurer</u>																																					
Issued 08/19/2013 by SLD																																						

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM