

REINSTATEMENT

| No. C 91970 Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 FEE DUE \$30.00 | Annual Report Form ADMIN DISSOLVED 07/08/2008 1. Mailing Address - Correct in this box, if applicable CRAIGMONT PRAIRIE ASSEMBLY OF GOD, DON DETRICK <i>CARY STERNBACK</i> 35181 SE DOUGLAS ST STE 200 PO Box 367 SNOWQUALMIE, WA 98065 <i>CRAIGMONT, ID</i> <i>83523</i> | 2. Registered Agent and Office NOT A P.O. BOX CARY STERNBACK 520 E MAIN ST CRAIGMONT, ID 83523 3. New registered agent signature | | | | | | | | | | | | |
|---|--|--|------------------|-----------|------------------------|------|-------|-----|--|-----------------------|-------------------|------------------|-----------|--------------|
| 4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of management. Limited and Limited Liability Partnerships: Enter names and addresses of at least two (2) partners. <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px solid black;">Office held</th> <th style="text-align: left; border-bottom: 1px solid black;">Name</th> <th style="text-align: left; border-bottom: 1px solid black;">Street or P.O. Address</th> <th style="text-align: left; border-bottom: 1px solid black;">City</th> <th style="text-align: left; border-bottom: 1px solid black;">State</th> <th style="text-align: left; border-bottom: 1px solid black;">Zip</th> </tr> </thead> <tbody> <tr> <td style="vertical-align: top;"><i>PRESIDENT</i> <i>(SECRETARY)</i></td> <td style="vertical-align: top;"><i>CARY STERNBACK</i></td> <td style="vertical-align: top;"><i>PO Box 367</i></td> <td style="vertical-align: top;"><i>CRAIGMONT</i></td> <td style="vertical-align: top;"><i>ID</i></td> <td style="vertical-align: top;"><i>83523</i></td> </tr> </tbody> </table> | | | Office held | Name | Street or P.O. Address | City | State | Zip | <i>PRESIDENT</i> <i>(SECRETARY)</i> | <i>CARY STERNBACK</i> | <i>PO Box 367</i> | <i>CRAIGMONT</i> | <i>ID</i> | <i>83523</i> |
| Office held | Name | Street or P.O. Address | City | State | Zip | | | | | | | | | |
| <i>PRESIDENT</i> <i>(SECRETARY)</i> | <i>CARY STERNBACK</i> | <i>PO Box 367</i> | <i>CRAIGMONT</i> | <i>ID</i> | <i>83523</i> | | | | | | | | | |
| 5. Organized under the laws of: IDAHO C 91970 | 6. Signature <i>Cary Sternback</i> Date <i>7/16/08</i> Name (Typed or Printed) <i>CARY STERNBACK</i> Title <i>PASTOR</i> | | | | | | | | | | | | | |

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