No. C 114996	Reinstatement Annual Report Form	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.** SPEELMAN, INC. JAN SPEELMAN ~~910 MAIN AVE~~ ~~ST. MARIES ID 83861~~ 503 W APPLEWAY ST. K COEUR DALENE ID 83814	JAN SPEELMAN 910 MAIN AVE ST. MARIES ID 83861
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
PRESIDENT	JAN V. SPEELMAN	910 MAIN AVE	ST. MARIES	ID	US	83861
SECRETARY	JULIE L. SPEELMAN	910 MAIN AVE	ST. MARIES	ID	US	83861.

5. Organized Under the Laws of:	6. Signature:	Date:
IDAHO C 114996	Name (type or print): JAN V. SPEELMAN	Title: PRESIDENT

Issued 01/28/2014 by online

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM