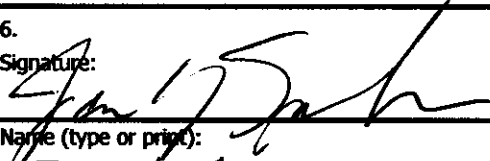


No. C 114996		Reinstatement Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX)	
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. SPEELMAN, INC. JAN SPEELMAN 910 MAIN AVE ST. MARIES ID 83861 503 W APPLEWAY ST. K COEUR D'ALENE ID 83814		JAN SPEELMAN 910 MAIN AVE ST. MARIES ID 83861	
REINSTATEMENT FEE DUE: \$30.00				3. <u>New</u> 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 L. 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.			
IDAHO C 114996		Signature: 		Date: 1-28-2014	
		Name (type or print): JAN L. SPEELMAN		Title: PRESIDENT	
Issued 01/28/2014 by online					

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM