

11/15/2013 10:21 FAX

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No. C 135551		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		ADMIN DISSOLVED 12/05/2007		LA FONDA MERRICK 1012 ALMOND ST NAMPA ID 83686-5902	
REINSTATEMENT FEE DUE: \$30.00		1. Mailing Address: Correct in this box if needed. MERRICK FAMILY OF IDAHO, INC. LAFONDA J. MERRICK 2012 ALMOND ST P.O. Box 3835 NAMPA ID 83686-5902 83653		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
CEO	LaFonda Merrick	P.O. Box 3835	Nampa, ID	83653	
President	Emily Call	P.O. Box 3815	Nampa, ID	83653	
Vice President	Nick Merrick	P.O. Box 3835	Nampa, ID	83653	
Vice President	Katy Starr	P.O. Box 3835	Nampa, ID	83653	
Vice President	Brian Merrick	P.O. Box 3835	Nampa, ID	83653	
Secretary	Tim Merrick	P.O. Box 3835	Nampa, ID	83653	
5. Organized Under the Laws of: IDAHO C 135551		6. Signature:  Name (type or print): LaFonda Merrick Date: 11-19-13 Title: CEO			
Issued 11/15/2013 by SLD					

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. **Notes:** To ensure future mailings, the corrected address must be inside Block 1.

Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. **Notes:** The office of the registered agent must be at a street address in Idaho, not a Post Office Box or Personal Mail Box.

Block 3: Only a new registered agent must sign in Block 3.

Block 4: Enter names and business addresses of president, secretary, and directors. **Notes:** DO NOT put "same as last year" or "same as above". These will not be accepted. Changes here will not affect the address in Block 1. If more space is needed please add an attachment.

Block 5: May not be altered through the use of this form.

Block 6: The annual report must be signed by a person authorized to represent the corporation. Print or type the name of the signer below the signature.

**** The image of this form will be available on the internet once it has been filed. DO NOT enter Social Security numbers.**

If the corporation is no longer doing business in Idaho, you may file the appropriate form. Forms are available on the website at www.sos.idaho.gov. However, if no timely annual report is filed, administrative action will be taken, at no cost to the corporation to terminate the legal existence. If you have any questions contact the Commercial Division at (208) 334-2301.

If the document is incorrect, is there a telephone number to reach you for corrections? 208-467-3720