

No. C 154810	Reinstatement Annual Report Form ADMIN DISSOLVED 08/15/2014		2. Registered Agent and Office (NOT A P.O. BOX) CARRIE MCCARTY 2873 E 14 N IDAHO FALLS ID 83401														
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. EAGLE ROCK DANCE INC 2873 E 14 N IDAHO FALLS ID 83401		3. <u>New</u> Registered Agent Signature.														
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>Director</td> <td>Carrie McCarty</td> <td>2873 E 14 N</td> <td>Idaho Falls</td> <td>ID</td> <td>USA</td> <td>83401</td> </tr> </tbody> </table>				Office Held	Name	Street or PO Address	City	State	Country	Postal Code	Director	Carrie McCarty	2873 E 14 N	Idaho Falls	ID	USA	83401
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Director	Carrie McCarty	2873 E 14 N	Idaho Falls	ID	USA	83401											
5. Organized Under the Laws of: IDAHO C 154810	6. Signature: <u>Carrie McCarty</u> Name (type or print): <u>Carrie McCarty</u> Date: <u>2/4/15</u> Title: <u>Director</u>																

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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM