

FILED EFFECTIVE

No. C 124893

Reinstatement Annual Report Form
ADMIN DISSOLVED 10/05/2010

2. Registered Agent and Office
(NOT A P.O. BOX)

MICHAEL S HOMAN
~~2229 W STATE ST STE B~~
BOISE ID ~~83702~~
83714

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.
ORCHARD RETAIL SHOPPING CENTER, INC.
MICHAEL S HOMAN
~~2229 W STATE ST STE B~~ 7402 Tobi St
BOISE ID ~~83702~~
83714

3. New Registered Agent Signature.

REINSTATEMENT FEE
DUE: \$30.00

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
SECRETARY pres.	MICHAEL S. HOMAN	7402 Tobi St.	Boise	ID	ADA	83714

5. Organized Under the Laws of:

IDAHO
C 124893

6.

Signature:

Date:

7-22-13

Name (type or print):

Michael S. HOMAN

Title:

Pres.