FILED EFFECTIVE

No. C 159347	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 06/05/2008 1. Mailing Address: Correct in this box if needed. NESTLED ISLAND HOMEOWNERS ASSOCIATION, INC. LARRY G FLYNN 8580 PETERSBURG AVE	LARRY G FLYNN 8580 PETERSBURG AVE LETHA ID 83636 3. New Registered Agent Signature.
REINSTATEMENT FEE DUE: \$30.00	LETHA ID 83636	
4. Corporations: Enter Name Office Held Nam	es and Business Addresses of President, Secretary, Directors e Street or PO Address	6 %
Rrs LA	my Flynn 8580 Retast	State Country Postal Code
. Organized Under the Laws	of: 6.	
IDAHO	Signature: Our Hymn	Date: 3-17-201
C 159347	Name (type or print): Lawy F/c	1 ma Title: Pres
sued 03/17/2010 by CLH	•••	

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Pay special attention to the mailing address. If the correct address is not given in Block 1, strike it out and write in the correct address. **Note:** 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. Note: