

No. **W 19213**

Due no later than May 31, 2009

Annual Report Form

2. Registered Agent and Office **NO PO BOX**

Return to:

SECRETARY OF STATE
450 NORTH FOURTH STREET
PO BOX 83720
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

JON GRAVESTOCK ENTERPRISES LTD. CO.
JON GRAVESTOCK
1688 SHEPHERD RD
SAINT MARIES, ID 83861JON GRAVESTOCK
1688 SHEPHERD RD
SAINT MARIES, ID- 83861**NO FILING FEE IF
RECEIVED BY DUE DATE**3. ~~New~~ Registered Agent Signature

4. Limited Liability Companies: Enter Names and Addresses of Managers.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
MANAGER	JON GRAVESTOCK	1688 Shepherd Rd	Saint Maries	ID	83861

5. Organized Under the Laws of:

IDAHO
W 19213

6.

Signature



Date

3-14-09

Name

(Typed or
Printed)

JON GRAVESTOCK

Title

MANAGER

Issued 03/02/2009

Do Not Tape or Staple

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