No. C 157478		Due no later than Nov 30, 2009		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE	1 Mailin	Annual Report Form 1. Mailing Address: Correct in this box if needed. CROSS'S CRASHES, INC. LARRY CROSS 3435 E EDWARDS IDAHO FALLS ID 83401		LARRY CROSS 3435 E EDWARDS IDAHO FALLS ID 83401 3. New Registered Agent Signature:*			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	CROSS'S (LARRY CR 3435 E ED						
NO FILING FEE IF RECEIVED BY DUE DATE	<u> </u>						
4. Corporations: Enter Names an	d Business Addresses	of President, Secretary, and Directors. Trea	surer (optional).				
Office Held Name	e	Street or PO Address	City	State	Country	Postal Code	
PRESIDENT LARR	Y M CROSS	3435 E EDWARDS DR	IDAHO FALLS	ID	USA	83401-1333	
5. Organized Under the Laws of: 6. Annual Report m		port must be signed.*					
ID	Signature	Signature: Larry Cross		Date: 10/16/2009			
C 157478	Name (typ	Name (type or print): Larry Cross		Title: President			
Processed 10/16/2009	* Electronical	* Electronically provided signatures are accepted as original signatures.					