

Annual Report Form  
Due No Later Than November 30, 1998

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

Return to:  
SECRETARY OF STATE  
700 WEST JEFFERSON  
PO BOX 83720  
BOISE, ID 83720-0080

NO FEE REQUIRED

\* FIRST NOTICE \*

1. Mailing Address - Please Correct, If Not Correct

BARK BLOWERS, INC.  
EARL GRIEF  
582 E BOISE AVE STE 201

BOISE ID 83706

EARL GRIEF  
396 E LINDEN ST

BOISE ID 83706

3. Organized Under the Laws of:

ID C108467

4. Corporations: Enter Names and Business Addresses of **President, Secretary and Directors**  
Limited Liability Companies: Enter Names and Addresses of ☐ Managers or ☐ Members (check one)

Office held

Name

Street or P.O. Address

City

State

Zip

Pres	EARL Grief	396 E. LINDEN ST	Boise	Id	83706
Sec.	Kathy Grief	396 E. LINDEN ST	Id	Id	Id

5. Signature of New Registered Agent

6.

Signature

*Earl Grief*

Date

7/29/98

Name (Typed or Printed)

EARL GRIEF

Title

Pres

ISSUED: 07-03-1998

DO NOT TAPE OR STAPLE

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