


No. C 151059	Reinstatement Annual Report Form ADMIN DISSOLVED 01/09/2007		2. Registered Agent and Office (NOT A P.O. BOX) MARILYN STONE 438 NORTH 2000 EAST ST ANTHONY ID 83445																					
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. STONEMOUNTAIN INFORMATION TECHNOLOGY, INC 438 NORTH 2000 EAST ST ANTHONY ID 83445		3. <u>New Registered Agent Signature.</u>																					
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres. <table border="1"> <thead> <tr> <th>Office Held</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>President</td> <td>LARRY Stone</td> <td>438 N 2000 E</td> <td>St. Anthony</td> <td>ID</td> <td>USA</td> <td>83445</td> </tr> <tr> <td>VP</td> <td>MARILYN Stone</td> <td>438 N 2000 E</td> <td>St. Anthony</td> <td>ID</td> <td>USA</td> <td>83445</td> </tr> </tbody> </table>				Office Held	Name	Street or PO Address	City	State	Country	Postal Code	President	LARRY Stone	438 N 2000 E	St. Anthony	ID	USA	83445	VP	MARILYN Stone	438 N 2000 E	St. Anthony	ID	USA	83445
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President	LARRY Stone	438 N 2000 E	St. Anthony	ID	USA	83445																		
VP	MARILYN Stone	438 N 2000 E	St. Anthony	ID	USA	83445																		
5. Organized Under the Laws of:  IDAHO C 151059	6. Signature:  Name (type or print): LARRY Stone Date: 9-2-14 Title: President																							

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## INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM