

No. W 29058		Due no later than Mar 31, 2011		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form		TOM KIRPATRICK 151 N 500 W BLACKFOOT ID 83221			
		1. Mailing Address: Correct in this box if needed. GROVE CITY DRYWALL & STUCCO, LLC LORINA KIRKPATRICK 151 N 500 W BLACKFOOT ID 83221 USA		3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MEMBER	TOM KIRKPATRICK	151 N 500 W	BLACKFOOT	ID	USA	83221	
MEMBER	LORINA KIRKPATRICK	151 N 500 W	BLACKFOOT	ID	USA	83221	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 29058		Signature: Lorina Kirkpatrick			Date: 03/31/2011		
		Name (type or print): Lorina Kirkpatrick			Title: Member		
Processed 03/31/2011		* Electronically provided signatures are accepted as original signatures.					