

No.

C 126984

Due no later than January 31, 2008

Annual Report Form

2. Registered Agent and Office NO PO BOX

JOE A WITHERSPOON

490 S 100 W

JEROME, ID 83338

3. New Registered Agent Signature

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

FORKLIFT DOCTOR, INC.
JOE A WITHERSPOON
490 S 100 W
JEROME, ID 83338

NO FILING FEE IF

RECEIVED BY DATE

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

Office heldNameStreet or P.O. AddressCityStateZip

Pres. Joe Witherspoon 490 S. 100 W. Jerome, ID. 83338

V.P./Sec. Lynn Witherspoon 490 S. 100 W. Jerome, ID. 83338

5. Organized Under the Laws of:

IDAHO

C 126984

6.

Signature

Joe Witherspoon

Date

1/28/08

Name (Typed or Printed)

Joe Witherspoon

Title

Pres.

Issued 11/01/2007

Do Not Tape or Staple

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