No. <b>C 24301</b>		Due no later than Apr 30, 2014		2. Registered Age	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE		Annual Report Form  1. Mailing Address: Correct in this box if needed.		700 NODTU 20	SHON SHULDBERG 700 NORTH 2ND			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		ASHTON MEMORIAL, INC. SHON SHULDBERG BOX 838 ASHTON ID 83420		ASHTON ID	ASHTON ID 83420  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		ASTITUTE OSTEO		J. <u>INCW</u> Registere	or <u>rest</u> regions of right orginature.			
4. Corporations: Enter N	ames and Busin	ess Addresses of Pr	esident, Secretary, and Directors. Treas	surer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	RENAE OSWALD		PO BOX 838	ASHTON	ID	USA	83420	
DIRECTOR	MICKIE FUNK		PO BOX 838	ASHTON	ID	USA	83420	
DIRECTOR	GLEN POND		PO BOX 838	ASHTON	ID	USA	83420	
PRESIDENT	WILLIAM VROMAN		4507 SAWTELL PEAK RD.	ISLAND PARK	ID	USA	83429	
DIRECTOR	KRISTIN LENZ		PO BOX 838	ASHTON	ID	USA	83420	
DIRECTOR	JAN STRONKS		PO BOX 838	ASHTON	ID	USA	83420	
DIRECTOR	JAY BAILEY		PO BOX 838	ASHTON	ID	USA	83420	
SECRETARY	SHON SHULDBERG		PO BOX 838	ASHTON	ID	USA	83420	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Shon Shuldberg			Date: 03/20/2014			
C 24301		Name (type or p		Title: Secretary				
Processed 03/20/2014 * Electronically provided signatures are accepted as original signatures.								