No. C 160648		Due no later than May 31, 2009		2. Registered Agent and Address (NO PO BOX)				
Return to:		Annual Report Form		SHARON E EMERSON 820 S MAIN ST CASCADE ID 83611				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed.						
		CRYSTAL MOUNTAIN ROCK & STONE, INC. ROCKY L SMITH PO BOX 534						
		CASCADE ID 83611		3. New Registered Agent Signature:*				
4. Corporations: Enter	Names and Busin	ess Addresses of Pres	ident, Secretary, and Directors. Tre	asurer (d	optional).			
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
DIRECTOR SECRETARY	ROCKY L SI BARBARA J		P.O. BOX 534 P.O. BOX 534		CASCADE CASCADE	ID ID	USA USA	83611 83611
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Rocky L. Smith			Date: 04/06/2009			
C 160648		Name (type or print): Rocky L. Smith			Title: Vice President			
Processed 04/06/2009		* Electronically provid	ed signatures are accepted as origi	inal signa	itures.			