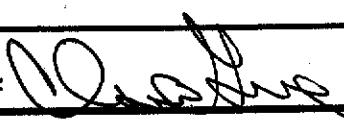


No. <b>C 154558</b>		Due no later than May 31, 2010 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) BONNIE GROVE 891 BODIE CANYON RD PRIEST RIVER ID 83856	
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		1. Mailing Address: Correct in this box if needed. GROVE CONTRACTING, INC.  PO BOX 1401 PRIEST RIVER ID 83856		3. New Registered Agent Signature.	
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors and (optional) Treasurer.					
Office Held	Name	Street or PO Address	City	State	Country Postal Code
President	Claud Grove	PO Box 1401	Priest River	ID	USA 83856
Secretary	Debra Grove	PO Box 1401	Priest River	ID	USA 83856
Director	Claud Grove	PO Box 1401	Priest River	ID	USA 83856
Director	Debra Grove	PO Box 1401	Priest River	ID	USA 83856
5. Organized Under the Laws of:		6.			
IDAHO C 154558		Signature: 		Date: 4/7/10	
		Name (type or print): Claud Grove		Title: President	
Issued 03/24/2010 by KAH				102934	

## INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

**Block 1:** Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the corrected address must be inside Block 1.

**Block 2:** To change the registered agent or office, strike the incorrect information and write in the correct information. **Note:** The office of the registered agent must be at a street address in Idaho; not a Post Office Box or Personal Mail Box.

**Block 3:** Only a new registered agent must sign in Block 3.

**Block 4:** Enter names and business addresses of president, secretary, and directors. **Note:** Do not put "same as last year" or "same as above". These will not be accepted. Changes here will not affect the address in Block 1. Be sure to include office held for each name listed.

**Block 5:** May not be altered through the use of this form.

**Block 6:** The annual report must be signed by a person authorized to represent the corporation. Print or type the name of the signer below the signature.

**\*\* The image of this form will be available on the Internet once it has been filed. DO NOT enter Social Security numbers.**

If the Corporation is no longer doing business in Idaho, you may file the appropriate form and fee. Forms are available on the website at [www.sos.idaho.gov](http://www.sos.idaho.gov). However, if no timely annual report is filed, administrative action will be taken, at no cost to the Corporation to terminate the legal existence. If you have any questions contact the Commercial Division at (208) 334-2301.

POSTMARK DATES WILL NOT BE ACCEPTED