

No. W 15061

Due no later than April 30, 2009

Annual Report Form

2. Registered Agent and Office NO PO BOX

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

HOLST WRECKING LAND, LLC
PO Box 486
Ucon, ID 83454-0486
*New*Shauna Holst
10126 N. Yellowstone
Idaho Falls, ID 83401
*New*NO FILING FEE IF
RECEIVED BY DUE DATE

3. New Registered Agent Signature

Shauna L. Holst

4. Limited Liability Companies: Enter Names and Addresses of Managers.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Manager	Jon S. Holst	PO Box 486	Ucon	ID	83454
Manager	Shauna L. Holst	PO Box 486	Ucon	ID	83454

5. Organized Under the Laws of:

IDAHO
W 15061

6.

Signature

Shauna L. Holst
Shauna Holst

Date

03.06.09

Managing Member

Name

(Typed or
Printed)

Title

Issued 02/02/2009

Do Not Tape or Staple

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