Reinstatement Annual Report Form	(NOT A P.O. BOX)
1. Mailing Address: Correct in this box if needed. KNIGHT'S GLASS SERVICE, INC. JON KNIGHT 4975 W MCMURTREY ST MERIDIAN ID 83646	JON KNIGHT 4975 W MCMURTREY ST MERIDIAN ID 83642
	3. <u>New</u> 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 Jon Knight 4975 w. memority Meridian FD. New 83646 Secretary Julie Knight 11 11 11 11 11 11 11 11 11	
Name (type or print): Jon Knight	Date: 6/12/12 Title: President.
	KNIGHT'S GLASS SERVICE, INC. JON KNIGHT 4975 W MCMURTREY ST MERIDIAN ID 83646 Names and Business Addresses of President, Secreta Name Street or PO Address City Ton Knight 4975 w. McMortrey Mexicial Knight II

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM