

No. C 98284	Reinstatement Annual Report Form ADMIN DISSOLVED 07/10/2013		2. Registered Agent and Office (NOT A P.O. BOX) NEIL GROVER 5119 E HANSEN AVE IONA ID 83427																					
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. IDAHO TRUCK SERVICE, INC. NEIL GROVER PO BOX 231 IONA ID 83427		3. New Registered Agent Signature.																					
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres. Office Held <table border="1"> <thead> <tr> <th>Office Held</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>PRESIDENT</td> <td>NEIL GROVER</td> <td>P.O. BOX 231</td> <td>IONA</td> <td>ID</td> <td>Boon</td> <td>83427</td> </tr> <tr> <td>SECRETARY</td> <td>KRISTINA GROVER</td> <td>P.O. BOX 231</td> <td>IONA</td> <td>ID</td> <td>Boon</td> <td>83427</td> </tr> </tbody> </table>				Office Held	Name	Street or PO Address	City	State	Country	Postal Code	PRESIDENT	NEIL GROVER	P.O. BOX 231	IONA	ID	Boon	83427	SECRETARY	KRISTINA GROVER	P.O. BOX 231	IONA	ID	Boon	83427
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5. Organized Under the Laws of: IDAHO C 98284	6. Signature: <u>Neil Grover</u> Name (type or print): <u>NEIL GROVER</u>			Date: <u>7/17/13</u> Title: <u>PRESIDENT</u>																				

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