

No. C 126659	Reinstatement Annual Report Form ADMIN DISSOLVED 03/04/2010		2. Registered Agent and Office (NOT A P.O. BOX) DOUGLAS N. STONE 1414 S 2000 E GOODING ID 83330				
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. STONE CONSTRUCTION, INC. DOUGLAS N STONE 1414 S 2000 E GOODING ID 83330		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				
<i>President</i> <i>Secretary</i> <i>Directors</i> <i>Treasurer</i>	<i>Douglas N Stone</i> <i>1831B Rider Rd Buhl ID</i> <i>Twin Falls</i> <i>83316</i>						
5. Organized Under the Laws of: IDAHO C 126659		6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">Signature: <u><i>Douglas N Stone</i></u></td> <td style="width: 40%;">Date: <u><i>1-17-12</i></u></td> </tr> <tr> <td>Name (type or print): <u><i>Douglas N Stone</i></u></td> <td>Title: <u><i>Owner</i></u></td> </tr> </table>		Signature: <u><i>Douglas N Stone</i></u>	Date: <u><i>1-17-12</i></u>	Name (type or print): <u><i>Douglas N Stone</i></u>	Title: <u><i>Owner</i></u>
Signature: <u><i>Douglas N Stone</i></u>	Date: <u><i>1-17-12</i></u>						
Name (type or print): <u><i>Douglas N Stone</i></u>	Title: <u><i>Owner</i></u>						