

No. C 10194	Due no later than April 30, 2005 Annual Report Form		2. Registered Agent and Office NO PO BOX
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address - Correct in this box, if applicable		ROBERT LIVESAY 244 LOMAX IDAHO FALLS, ID 83401
NO FILING FEE IF RECEIVED BY DUE DATE	CROWN PLUMBING, INC. 244 LOMAX IDAHO FALLS, ID 83401		3. New Registered Agent Signature

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

Office held	Name	Street or P.O. Address	City	State	Zip
President	Susan Livesay	2898 W. Honeysuckle Ln.	Idaho Falls	ID	83402
V-Pres.	Robert Livesay	" " "	"	"	"

5. Organized Under the Laws of: IDAHO C 101947	6. Signature _____ Name _____ (Typed or Printed)	Susan Livesay Susan Livesay	Date 2/12/05 Title President
2/01	Do Not _____	State _____	2005