

No. C111536	Annual Report Form 1996 Due No Later Than November 30,		2. Registered Agent and Office NOT A P.O. BOX																		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED * FIRST NOTICE *	1. Mailing Address - Please Correct, If Not Correct MCBRIDE CONSTRUCTION, INC. SHAWN MCBRIDE 775 LAKESIDE DRIVE BLACKFOOT ID 83221		SHAWN MCBRIDE 775 LAKESIDE DRIVE BLACKFOOT ID 83221 3. Organized Under the Laws of: ID C111536																		
4. Corporations: Enter Names and Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one) <table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>President,</td> <td>Michael S. McBride,</td> <td>750 Leonidas Pocatello,</td> <td>ID</td> <td>83202</td> <td></td> </tr> <tr> <td>Secretary/Treasurer,</td> <td>Shawn M. McBride,</td> <td>775 Lakeside Dr.,</td> <td>Blackfoot,</td> <td>ID,</td> <td>83221</td> </tr> </tbody> </table>				Office held	Name	Street or P.O. Address	City	State	Zip	President,	Michael S. McBride,	750 Leonidas Pocatello,	ID	83202		Secretary/Treasurer,	Shawn M. McBride,	775 Lakeside Dr.,	Blackfoot,	ID,	83221
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5. NATURE OF BUSINESS CONSTRUCTION	6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. Signature <u>Shawn McBride</u> Date <u>7-30-96</u> Name (Typed or Printed) <u>SHAWN MCBRIDE</u> Title <u>Secretary</u>																				

ISSUED: 07-06-1996

2013