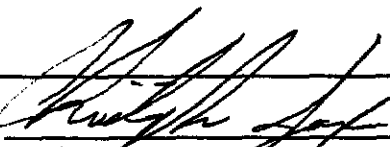


No. <b>W 36688</b>	<b>Due no later than February 28, 2009</b> <b>Annual Report Form</b>	2. Registered Agent and Office <b>NO PO BOX</b>
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		1. Mailing Address - Correct in this box, if applicable  JAXON CONSTRUCTION, LLC CHRIS JAXON PO BOX 938 PARMA, ID 83660

4. Limited Liability Companies: Enter Names and Addresses of Members.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
	Jaxon Const	1102 E Stockton	Parma	Id	83660

5. Organized Under the Laws of:  
 IDAHO  
 W 36688

6. Signature  Date 3-17-09  
 Name (Typed or Printed) Christopher Jaxon Title \_\_\_\_\_