

No. W 24334	Due no later than May 31, 2006 Annual Report Form	2. Registered Agent and Office NO PO BOX CLAIR KINGHORN 388 NORTH 3600 EAST LEWISVILLE, ID 83431																		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable KINGHORN MASONRY & PRECAST, LLC 388 NORTH 3600 EAST LEWISVILLE, ID 83431	3. <u>New</u> Registered Agent Signature																		
4. Limited Liability Companies: Enter Names and Addresses of Members. <table style="width: 100%; margin-top: 10px;"> <thead> <tr> <th style="text-align: left;"><u>Office held</u></th> <th style="text-align: left;"><u>Name</u></th> <th style="text-align: left;"><u>Street or P.O. Address</u></th> <th style="text-align: left;"><u>City</u></th> <th style="text-align: left;"><u>State</u></th> <th style="text-align: left;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>Member</td> <td>Clair R. Kinghorn</td> <td>388 N. 3600 E.</td> <td>Lewisville</td> <td>Id.</td> <td>83431</td> </tr> <tr> <td>Member</td> <td>Lexie Kinghorn</td> <td>388 N. 3600 E.</td> <td>Lewisville</td> <td>Id.</td> <td>83431</td> </tr> </tbody> </table>			<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	Member	Clair R. Kinghorn	388 N. 3600 E.	Lewisville	Id.	83431	Member	Lexie Kinghorn	388 N. 3600 E.	Lewisville	Id.	83431
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5. Organized Under the Laws of: <div style="text-align: center;">IDAHO W 24334</div>	6. Signature <u>Clair R Kinghorn</u> Date <u>4-5-06</u> Name (Typed or Printed) <u>Clair R Kinghorn</u> Title <u>Member</u>																			