No. C 135256		Due no later than Aug 31, 2008 Annual Report Form		2. Registered Ag	2. Registered Agent and Address (NO PO BOX) ROY W KENNEDY 3471 E 450 N LEWISVILLE ID 83431 3. New Registered Agent Signature:*			
Return to:				0.000 000.000 NO.00 NO.000 NO.				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.		NAME OF TAXABLE PARTY O				
		LINDEN ELEVATOR SPECIALTIES, INC. ROY KENNEDY PO BOX 106 LEWISVILLE ID 83431						
				3. <u>New</u> Register				
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Corporations: Enter I	Names and Busin	ess Addresses o	f President, Secretary, and Directors. Treasu	ırer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR	CAMILLE KE	NNEDY	P.O. BOX 106	LEWISVILLE	ID	USA	83431	
DIRECTOR	roy kennei	ΟY	P.O. BOX 106	LEWISVILLE	ID	USA	83431	
SECRETARY	KAREN S TA	AYLOR	P.O. BOX 106	LEWISVILLE	ID	USA	83431	
PRESIDENT	JERRY TAYL	OR	P.O. BOX 106	LEWISVILLE	ID	USA	83431	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 135256		Signature: k		Date: 09/24/2008				
		Name (type	or print): Karen S. Taylor		Title: Secretary			
Processed 09/24/2008		* Electronically provided signatures are accepted as original signatures.						