

No. C110277	Annual Report Form Due No Later Than November 30, 1997		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	1. Mailing Address - Please Correct, If Not Correct		LOWELL A THYKESON 402 LINDEN DR																			
	L T CONSTRUCTION, INC. 402 LINDEN DR		LEWISTON ID 83501 3. Organized Under the Laws of: ID C110277																			
4. Corporations: Enter Names and Business 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>Pres</td> <td>Lowell Thykeson</td> <td>402 LINDEN DR</td> <td>Lewiston</td> <td>Id</td> <td>83501</td> </tr> <tr> <td>V. Pres</td> <td>Marie Thykeson</td> <td>402 LINDEN DR</td> <td>Lewiston</td> <td>Id</td> <td>83501</td> </tr> </tbody> </table>					Office held	Name	Street or P.O. Address	City	State	Zip	Pres	Lowell Thykeson	402 LINDEN DR	Lewiston	Id	83501	V. Pres	Marie Thykeson	402 LINDEN DR	Lewiston	Id	83501
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5.		6. <table border="1"> <tr> <td>Signature</td> <td><i>Marie Thykeson</i></td> <td>Date</td> <td>7/18/97</td> </tr> <tr> <td>Name (Typed or Printed)</td> <td>MARIE THYKESON</td> <td>Title</td> <td>V.P.</td> </tr> </table>			Signature	<i>Marie Thykeson</i>	Date	7/18/97	Name (Typed or Printed)	MARIE THYKESON	Title	V.P.										
Signature	<i>Marie Thykeson</i>	Date	7/18/97																			
Name (Typed or Printed)	MARIE THYKESON	Title	V.P.																			

ISSUED: 07-04-1997

DO NOT TAPE OR STAPLE

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