|   | Annual Report Form 199  | 8 2. Registered Age | ent and Office No | OT A P.O. BOX      |
|---|---|---------------------|-------------------|--------------------|
| Return to:<br>SECRETARY OF STATE        | Due No Later Than November 30,  1. Mailing Address - Please Correct, If Not Correct                       | J A SAU             | NDERS &           | J V CHR            |
| 700 WEST JEFFERSON<br>PO BOX 83720      | B & B SUPPLY, INC.  | 17/0 (4             | WOODRUF           | FAVE               |
| BOISE, ID 83720-0080  NO FEE REQUIRED   | 1976 NORTH WOODRUFF   | IDAHO F             | _                 | 83401              |
| * FINAL NOTICE **                       |   | 3. Organized Und    | ler the Laws of:  |                    |
|   | IDAHO FALLS ID 83401  | ID                  | C1(               | 05079              |
| Limited Liability Companies: Ent        | Business Addresses of President, Secretary and Directors er Names and Addresses of   Managers or   Member | rs (check one)      |                   |                    |
| Office heid Name                        | Street or P.O. Address  | City                | State             | <u>Zip</u>         |
| resident Julie S<br>recretary Jay Chris | aunders 5078 W. B18   | Shelley             | ID                | <del>\$3</del> 274 |
| ecroary Jay Chris                       | Stensen 407 EVE DR.   | •                   |                   |                    |
|   |   | Idaho Falls         | ED.               | 83401              |
|   |   |                     |                   |                    |
| Signature of New Registered             |   |                     |                   | /                  |
| iignature of New Registered             | Agent 6. Signature Julia Saurala  |                     | 10/20             | 198                |
|   | Signature Julie Saunder   |                     | 10/20 1<br>Pres   | 198                |
| Signature of New Registered A           | Name (Typed or Mulie Saunder)   |                     | _                 | 198                |
| Signature of New Registered A           | Signature Julie Saunder   |                     | Pres              | /98                |
|   | Name (Typed or Mulie Saunder)   |                     | Pres              | 198                |
|   | Name (Typed or Mulie Saunder)   |                     | Pres              | 198                |