

No. W 18419

**Due no later than March 31, 2008
Annual Report Form**

2. Registered Agent and Office NO PO BOX

Return to:
**SECRETARY OF STATE
450 NORTH FOURTH STREET
PO BOX 83720
BOISE, ID 83720-0080**

1. Mailing Address - Correct in this box, if applicable

**REMODELS PLUS LLC
MARK
PO BOX 1116
NAMPA, ID 83653**

**MARK L STEVENS
923 9TH AVE S
NAMPA, ID 83651**

**NO FILING FEE IF
RECEIVED BY DUE DATE**

3. New Registered Agent Signature

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

Office held **Name** **Street or P.O. Address**
Owner Mark L Stevens Po Box 1116
Owner Jodi L Stoskopf Po Box 1116

City	State	Zip
Nampa	ID	83653
Nampa	ID	83653

5. Organized Under the Laws of:

**IDAHO
W 18419**

**6.
Signature**

**Name
(Typed or
Printed)**

**Mark Stevens
Mark L. Stevens**

Date

3-1-08

Title

Owner