

No. <b>C 179750</b>	<b>Due no later than 8/31/2009 Annual Report Form</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>																		
Return to:  SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	1. <b>Mailing Address: Correct in this box if needed.</b>  CUMMINS METAL FABRICATION INC 1959 LAURA CIR TWIN FALLS ID 83301		LYLE CUMMINS 1959 LAURA CIR TWIN FALLS ID 83301  3. <b>New Registered Agent Signature:</b>																		
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table border="1"> <thead> <tr> <th>Office Held</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Lyle Cummins</td> <td>1959 LAURA Circle</td> <td>TWIN FALLS</td> <td>ID</td> <td>83301</td> </tr> <tr> <td>Secretary</td> <td>DIANNA CUMMINS</td> <td>1959 LAURA Circle</td> <td>TWIN FALLS</td> <td>ID</td> <td>83301</td> </tr> </tbody> </table>				Office Held	Name	Street or PO Address	City	State	Zip	President	Lyle Cummins	1959 LAURA Circle	TWIN FALLS	ID	83301	Secretary	DIANNA CUMMINS	1959 LAURA Circle	TWIN FALLS	ID	83301
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Secretary	DIANNA CUMMINS	1959 LAURA Circle	TWIN FALLS	ID	83301																
5. Organized Under the Laws of:  <b>ID C 179750</b>	6. Annual Report must be signed. Signature: <u>Dianna Cummins</u> Date: <u>8-18-09</u> Name(type or print): <u>DIANNA CUMMINS</u> Title: <u>SECRETARY</u>																				