

No. **C 114218**

Due no later than Mar 31, 2001
Annual Report Form

2. Registered Agent and Office **NO PO BOX**

Return to:

SECRETARY OF STATE
700 WEST JEFFERSON
PO BOX 83720
BOISE, ID 83720-0080

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

SHADOW MOUNTAIN FRAMING, INC.
ANGELA R CLIFFORD-BURR
151 ORCHARD

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151 ORCHARD

KUNA, ID 83634

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

KUNA, ID 83634

3. New Registered Agent Signature

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Pres	Angie R Clifford-Burr	151 Orchard Ave.	KUNA	ID	83634
Vice Pres	Bruce D Burr	151 Orchard Ave	KUNA	ID	83634

5. Organized Under the Laws of:

IDAHO
C 114218

6.

Signature

Angie R Clifford-Burr

Date

1-24-01

Title:

Pres.

Name (Typed or Printed)

Angie R Clifford-Burr

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