

No. W 12098	Due no later than May 31, 2006 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 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable		JAMES M ST. CLAIR 726 LAKESIDE DR												
	ST. CLAIR CONSTRUCTION, LIMITED LIA PO BOX 457 VICTOR, ID 83455		VICTOR, ID 83455 3. <u>New</u> Registered Agent Signature												
4. Limited Liability Companies: Enter Names and Addresses of Managers. <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>Manager</td> <td>James M. St. Clair</td> <td>Po Box 457</td> <td>Victor</td> <td>ID</td> <td>83455</td> </tr> </tbody> </table>				Office held	Name	Street or P.O. Address	City	State	Zip	Manager	James M. St. Clair	Po Box 457	Victor	ID	83455
Office held	Name	Street or P.O. Address	City	State	Zip										
Manager	James M. St. Clair	Po Box 457	Victor	ID	83455										
5. Organized Under the Laws of: IDAHO W 12098		6. Signature <u><i>James M. St. Clair</i></u> Date <u>May 5, 2006</u> Name (Typed or Printed) <u>James M. St. Clair</u> Title <u>Managing Member</u>													

Issued 04/26/2006 by SLD

Do Not Tape or Staple

200605000985

Fold, seal and mail this portion.

C

C

S2021

O
G