

No. **W 9294**

Due no later than Jul 31, 2001
Annual Report Form

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

JIM MACFARLANE CONSTRUCTION, LLC

517 N 16TH

PAYETTE, ID 83661

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

JAMES M MACFARLANE
2335 NE 16TH ST

FRUITLAND, ID 83619

3. New Registered Agent Signature

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

Office held Name

Street or P.O. Address

City

State

Zip

Manager James M. Macfarlane, 2353 NE 16th St., Fruitland, Idaho 83619

Member James L. Macfarlane, 5182 Caleb Ct., Fruitland, Idaho 83619

5. Organized Under the Laws of:

OREGON
W 9294

6.
Signature

Name (Typed or
Printed)

James M. Macfarlane
James M. Macfarlane

Date 6/15/01

Title: Manager
XXXX