

<b>No. W 18386</b>	<b>Due no later than March 31, 2008</b> <b>Annual Report Form</b>		<b>2. Registered Agent and Office NO PO BOX</b>													
<b>Return to:</b> SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF          RECEIVED BY DUE DATE</b>	<b>1. Mailing Address - Correct in this box, if applicable</b>  MCMaster EQUIPMENT, LLC LYNN S MCMaster 3145 N 3500 E KIMBERLY, ID 83341		LYNN S MCMaster 3145 N 3500 E KIMBERLY, ID 83341													
<b>3. New Registered Agent Signature</b>																
<b>4. Limited Liability Companies: Enter Names and Addresses of Managers.</b>  <table border="1"> <thead> <tr> <th data-bbox="56 440 203 471"><u>Office held</u></th> <th data-bbox="243 440 324 471"><u>Name</u></th> <th data-bbox="519 424 779 455"><u>Street or P.O. Address</u></th> <th data-bbox="1039 409 1096 440"><u>City</u></th> <th data-bbox="1242 404 1307 435"><u>State</u></th> <th data-bbox="1421 398 1469 429"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td data-bbox="40 481 178 564"><i>officer</i></td> <td data-bbox="227 471 544 523">LYNN S. MCMaster</td> <td data-bbox="584 461 828 507">3145N 3500E</td> <td data-bbox="941 445 1128 497">KIMBERLY</td> <td data-bbox="1218 440 1291 486">ID</td> <td data-bbox="1372 429 1510 476">83341</td> </tr> </tbody> </table>					<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	<i>officer</i>	LYNN S. MCMaster	3145N 3500E	KIMBERLY	ID	83341
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>											
<i>officer</i>	LYNN S. MCMaster	3145N 3500E	KIMBERLY	ID	83341											
<b>5. Organized Under the Laws of:</b> IDAHO W 18386		<b>6. Signature</b> <i>Lynn S. McMaster</i> <b>Name</b> (Typed or Printed) <u>LYNN S. MCMaster</u> <b>Date</b> <u>1-17-08</u> <b>Title</b> <u>OFFICER</u>														