No. C 86994		Due no later than Jun 30, 2009		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		CHUCK BUCKLE 405 5TH ST. N. BELLVUE BELLVUE ID 83313			
SECRETARY OF STATE	1. Mailing	1. Mailing Address: Correct in this box if needed. CHUCK BUCKLE PLUMBING INCORPORATED CHUCK BUCKLE CHUCK BUCKLE BOX 496					
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	CHUCK BUCI						
	BELLVUE ID	BELLVUE ID 83313		3. <u>New</u> Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).							
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
PRESIDENT CHUCK C BUCKLE		P.O. BOX 496 405 5TH ST N.	BELLEVUE	ID	USA	83313-496	
5. Organized Under the Laws of: 6. Annual Report must be signed.*							
ID	Signature: (Signature: Chuck Buckle		Date: 04/13/2009			
C 86994	Name (type	Name (type or print): Chuck Buckle		Title: Owner/President			
Processed 04/13/2009	* Electronically	* Electronically provided signatures are accepted as original signatures.					