

No. C 53957		Due no later than 8/31/2009 Annual Report Form		2. Registered Agent and Address (NO PO BOX)	
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. G. L. HUNEMILLER CONST., INC. GARY L HUNEMILLER P O BOX 480 CASCADE ID 83611		GARY L HUNEMILLER 1480 PINE LAKES DRIVE CASCADE ID 83611	
				3. New Registered Agent Signature:	
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.					
Office Held	Name	Street or PO Address	City	State	Zip
PRES	GARY L. HUNEMILLER	P.O. Box 480	CASCADE	IDA	83611
SEC	LORRAINE HUNEMILLER	"	"	"	"
5. Organized Under the Laws of: ID C 53957		6. Annual Report must be signed.			
		Signature: <u>Gary L Hunemiller</u>		Date: <u>9-24-09</u>	
		Name(type or print): <u>GARY L. HUNEMILLER</u>		Title: <u>PRES</u>	

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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM