


No. W 3565 Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	Due no later than February 29, 2008 Annual Report Form 1. Mailing Address - Correct in this box, if applicable SPIERS CONCRETE SYSTEMS AND EXCAVAT 655 E SHORTLINE ST KUNA, ID 83634	2. Registered Agent and Office NO PO BOX JEFF SPIERS 655 E SHORTLINE KUNA, ID 83634 3. <u>New</u> Registered Agent Signature												
4. Limited Liability Companies: Enter Names and Addresses of Managers. <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px solid black;">Office held</th> <th style="text-align: left; border-bottom: 1px solid black;">Name</th> <th style="text-align: left; border-bottom: 1px solid black;">Street or P.O. Address</th> <th style="text-align: left; border-bottom: 1px solid black;">City</th> <th style="text-align: left; border-bottom: 1px solid black;">State</th> <th style="text-align: left; border-bottom: 1px solid black;">Zip</th> </tr> </thead> <tbody> <tr> <td>LLC member</td> <td>Jeff Spiers</td> <td>7065 Hilltop way</td> <td>Boise</td> <td>ID</td> <td>83709</td> </tr> </tbody> </table>			Office held	Name	Street or P.O. Address	City	State	Zip	LLC member	Jeff Spiers	7065 Hilltop way	Boise	ID	83709
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LLC member	Jeff Spiers	7065 Hilltop way	Boise	ID	83709									
5. Organized Under the Laws of: IDAHO W 3565	6. Signature  Date <u>12-10-07</u> Name <small>(Typed or Printed)</small> _____ Title _____													

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Do Not Tape or Staple

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