

No. W 15230	Due no later than April 30, 2008		2. Registered Agent and Office 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	Annual Report Form 1. Mailing Address - Correct in this box, if applicable DUNCAN MARINE SERVICE, L.L.C. 1094 N MCGUIRE RD POST FALLS, ID 83854		KRAIG L DUNCAN 2604 W HARGRAVE AVE POST FALLS, ID 83854 <i>1094 N. McGuire Rd.</i> 3. New Registered Agent Signature																		
	4. Limited Liability Companies: Enter Names and Addresses of Managers. <table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>Pres.</td> <td>Kraig L. Duncan</td> <td>1094 N. McGuire Rd,</td> <td>Post Falls</td> <td>ID</td> <td>83854</td> </tr> <tr> <td>VP</td> <td>Melinda Duncan</td> <td>1094 N. McGuire Rd,</td> <td>Post Falls</td> <td>ID</td> <td>83854</td> </tr> </tbody> </table>				Office held	Name	Street or P.O. Address	City	State	Zip	Pres.	Kraig L. Duncan	1094 N. McGuire Rd,	Post Falls	ID	83854	VP	Melinda Duncan	1094 N. McGuire Rd,	Post Falls	ID
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5. Organized Under the Laws of: IDAHO W 15230	6. Signature <i>[Signature]</i> Name (Typed or Printed) <i>Melinda Duncan</i>		Date <i>2/14/08</i> Title <i>VP</i>																		

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