

No. C 93216	Due no later than Aug 31, 2002	2. Registered Agent and Office NO PO BOX																		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON 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 CAMPBELL ELECTRIC, INC. BOB D CAMPBELL 1770 ELDRIDGE AVE PO BOX 2912 TWIN FALLS, ID 83303	BOB D CAMPBELL 1770 ELDRIDGE AVE TWIN FALLS, ID 83301 3. <u>New</u> Registered Agent Signature																		
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;"><u>Office held</u></th> <th style="text-align: left;"><u>Name</u></th> <th style="text-align: left;"><u>Street or P.O. Address</u></th> <th style="text-align: left;"><u>City</u></th> <th style="text-align: left;"><u>State</u></th> <th style="text-align: left;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Bob D Campbell</td> <td>3210 N 2500E</td> <td>Filer</td> <td>ID</td> <td>83322</td> </tr> <tr> <td>Secretary</td> <td>Patry L Campbell</td> <td>3210 N 2500E</td> <td>Filer</td> <td>ID</td> <td>83322</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>	President	Bob D Campbell	3210 N 2500E	Filer	ID	83322	Secretary	Patry L Campbell	3210 N 2500E	Filer	ID	83322
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5. Organized Under the Laws of: IDAHO C 93216	6. Signature <u>Patry L Campbell</u> Date <u>6/13/02</u> Name <small>(Typed or Printed)</small> <u>Patry L Campbell</u> Title _____																			