

|                                                                                                                                                        |                  |                                                                                                                                                   |            |                                                          |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|------------|----------------------------------------------------------|---------|-------------|--|
| No. <b>C 134213</b>                                                                                                                                    |                  | Due no later than May 31, 2009                                                                                                                    |            | 2. Registered Agent and Address <b>(NO PO BOX)</b>       |         |             |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                  | <b>1. Mailing Address: Correct in this box if needed.</b><br>CHARLEY'S PLUMBING, INC.<br>CHARLEY C CUTLER<br>304 4TH AVE W<br>TWIN FALLS ID 83301 |            | CHARLEY C CUTLER<br>304 4TH AVE W<br>TWIN FALLS ID 83301 |         |             |  |
|                                                                                                                                                        |                  |                                                                                                                                                   |            | 3. <u>New</u> Registered Agent Signature:*               |         |             |  |
| 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                                                                                                                                              | CHARLEY C CUTLER | 304 4TH AVE W                                                                                                                                     | TWIN FALLS | ID                                                       | USA     | 83301-5815  |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>C 134213</b>                                                                                          |                  | 6. Annual Report must be signed.*<br>Signature: Charley C Cutler<br>Name (type or print): Charley C Cutler                                        |            |                                                          |         |             |  |
| Date: 03/15/2009<br>Title: President                                                                                                                   |                  |                                                                                                                                                   |            |                                                          |         |             |  |
| Processed 03/15/2009                                                                                                                                   |                  | * Electronically provided signatures are accepted as original signatures.                                                                         |            |                                                          |         |             |  |