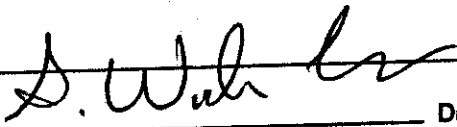
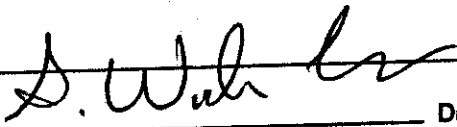
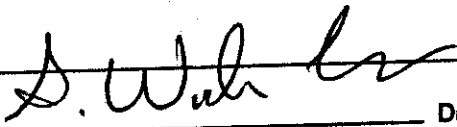


<b>No. W 16029</b>		<b>Due no later than July 31, 2007</b>		<b>2. Registered Agent and Office NO PO BOX</b>													
<b>Return to:</b> SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>Annual Report Form</b>		S WADE GARDNER 209 NW MAIN ST STE C BLACKFOOT, ID 83221													
		1. Mailing Address - Correct in this box, if applicable  WADE GARDNER CONSTRUCTION, LLC 209 NW MAIN ST STE C BLACKFOOT, ID 83221		3. <u>New</u> 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>Managing Member</td><td>S. Wade Gardner</td><td>209 NW Main St., Suite C</td><td>Blackfoot</td><td>ID</td><td>83221</td></tr></tbody></table>						Office held	Name	Street or P.O. Address	City	State	Zip	Managing Member	S. Wade Gardner	209 NW Main St., Suite C	Blackfoot	ID	83221
Office held	Name	Street or P.O. Address	City	State	Zip												
Managing Member	S. Wade Gardner	209 NW Main St., Suite C	Blackfoot	ID	83221												
5. Organized Under the Laws of: IDAHO W 16029		6. <table border="1"><tr><td>Signature</td><td></td><td>Date</td><td>5/14/07</td></tr><tr><td>Name (Typed or Printed)</td><td>S. Wade Gardner</td><td>Title</td><td>Managing Member</td></tr></table>				Signature		Date	5/14/07	Name (Typed or Printed)	S. Wade Gardner	Title	Managing Member				
Signature		Date	5/14/07														
Name (Typed or Printed)	S. Wade Gardner	Title	Managing Member														

Issued 05/01/2007

Do Not Tape or Staple

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