

No. **W 18386**Due no later than **March 31, 2006****Annual Report Form**

Return to:

SECRETARY OF STATE  
700 WEST JEFFERSON  
PO BOX 83720  
BOISE, ID 83720-0080**1. Mailing Address - Correct in this box, if applicable**MCMASTER EQUIPMENT, LLC  
LYNN S MCMASTER  
3145 N 3500 E  
KIMBERLY, ID 83341**2. Registered Agent and Office NO PO BOX**LYNN S MCMASTER  
3145 N 3500 E  
KIMBERLY, ID 83341**NO FILING FEE IF  
RECEIVED BY DUE DATE****3. New Registered Agent Signature****4. Limited Liability Companies: Enter Names and Addresses of Members.**Office heldNameStreet or P.O. AddressCityStateZipMEMBER LYNN MCMASTER  
OWNER

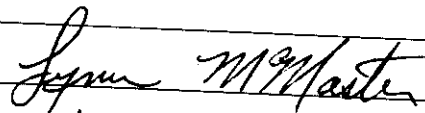
3145 N 3500 E

KIMBERLY

ID. 83341

**5. Organized Under the Laws of:**IDAHO  
W 18386**6.**

Signature



Date

1-5-06

Name (Typed or Printed)

LYNN MCMASTER

Title

MEMBER

Issued 01/04/2006

Do Not Tape or Staple

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