

| No. C 145720 | Due no later than October 31, 2005 Annual Report Form | | 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 | 1. Mailing Address - Correct in this box, if applicable | | LESLIE A CHAPMAN 241 HARVEST RUN IDAHO FALLS, ID 83404 3. <u>New</u> Registered Agent Signature | | | | | | | | | | | | | | | | | | | | | | | | |
| | CHAPMAN'S ELECTRICAL CONTRACTING IN PO BOX 51123 IDAHO FALLS, ID 83405 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table border="0"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>PRESIDENT -</td> <td>LESLIE A. CHAPMAN</td> <td>241 HARVEST RUN</td> <td>IDAHO FALLS</td> <td>ID</td> <td>83404</td> </tr> <tr> <td colspan="6">SECRETARY - SAME AS ABOVE</td> </tr> <tr> <td colspan="6">NO DIRECTORS -</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 - | LESLIE A. CHAPMAN | 241 HARVEST RUN | IDAHO FALLS | ID | 83404 | SECRETARY - SAME AS ABOVE | | | | | | NO DIRECTORS - | | | | | |
| <u>Office held</u> | <u>Name</u> | <u>Street or P.O. Address</u> | <u>City</u> | <u>State</u> | <u>Zip</u> | | | | | | | | | | | | | | | | | | | | | | |
| PRESIDENT - | LESLIE A. CHAPMAN | 241 HARVEST RUN | IDAHO FALLS | ID | 83404 | | | | | | | | | | | | | | | | | | | | | | |
| SECRETARY - SAME AS ABOVE | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| NO DIRECTORS - | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 5. Organized Under the Laws of: IDAHO C 145720 | | 6. Signature <u><i>Leslie A Chapman</i></u> Date <u>08/11/05</u> Name <small>(Typed or Printed)</small> <u>LESLIE A. CHAPMAN</u> Title <u>OWNER</u> | | | | | | | | | | | | | | | | | | | | | | | | | |

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