

No. C 79202	Due no later than Aug 31, 2000 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 MOUNTAIN VIEW CONSTRUCTION, INC. P. O. BOX 113 ST. MARIES, ID 83861		MICHAEL P LAPLANTE ROUTE 1, CHERRY CREEK ST. MARIES, ID 83861 3. <u>New</u> Registered Agent Signature																								
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table border="1"> <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>Michael P. LaPlante</td> <td>P. O. Box 581</td> <td>St. Maries</td> <td>ID</td> <td>83861</td> </tr> <tr> <td>Secretary</td> <td>Cathleen Louise LaPlante</td> <td>P. O. Box 581</td> <td>St. Maries,</td> <td>ID</td> <td>83861</td> </tr> <tr> <td>Director</td> <td>Michael P. LaPlante</td> <td>P. O. Box 581</td> <td>St. Maries,</td> <td>ID</td> <td>83861</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	Michael P. LaPlante	P. O. Box 581	St. Maries	ID	83861	Secretary	Cathleen Louise LaPlante	P. O. Box 581	St. Maries,	ID	83861	Director	Michael P. LaPlante	P. O. Box 581	St. Maries,	ID	83861
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5. Organized Under the Laws of: IDAHO C 79202	6. Signature <u><i>Michael P LaPlante</i></u> Date <u>8/25/00</u> Title: Name <small>(Typed or Printed)</small> <u>MICHAEL P. LaPLANTE</u> XXXX <u>PRESIDENT</u>																										

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