| No. C 94048 | | Due no later than Dec 31, 2010 | | 2. Registered Agent and Address (NO PO BOX) | | | | |
|--|----------------|--|---|---|----------------------------|-------|---------|-------------|
| Return to: | | Annual Report Form | | SUSAN MELBOURN | | | | |
| SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | 1. Mailing Address: Correct in this box if needed. ALBENI FALLS BUILDING SUPPLY, INC. SUSAN MELBOURN 520 HWY 2 OLDTOWN ID 83822 | | 520 HWY 2 OLDTOWN ID 83822 3. New Registered Agent Signature:* | | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | | | | | |
| 4. Corporations: Enter Na | ames and Busin | ess Addresses of I | President, Secretary, and Directors. Tr | easurer (| optional). | | | |
| Office Held | Name | | Street or PO Address | | City | State | Country | Postal Code |
| PRESIDENT | DAVID T MI | ELBOURN | 520 HWY 2 | | OLDTOWN | ID | USA | 83822 |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | |
| ID | | Signature: Susan Melbourn | | Date: 10/13/2010 | | | | |
| C 94048 | | Name (type or print): Susan Melbourn | | | Title: Secretary/treasurer | | | |
| Processed 10/13/2010 * Electronically provided signatures are accepted as original signatures. | | | | | | | | |