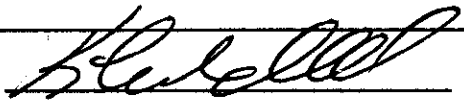


No. W 69324	Due no later than December 31, 2008 Annual Report Form		2. Registered Agent and Office NO PO BOX KEVIN CALDWELL 223 S 900 W BLACKFOOT, ID 83221												
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable TRI-COUNTY BUILDERS, L.L.C. 223 S 900 W BLACKFOOT, ID 83221		3. New Registered Agent Signature												
4. Limited Liability Companies: Enter Names and Addresses of Members. <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 15%;"><u>Office held</u></th> <th style="text-align: left; width: 20%;"><u>Name</u></th> <th style="text-align: left; width: 30%;"><u>Street or P.O. Address</u></th> <th style="text-align: left; width: 15%;"><u>City</u></th> <th style="text-align: left; width: 10%;"><u>State</u></th> <th style="text-align: left; width: 10%;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>manager</td> <td>Kevin Caldwell</td> <td>223 So. 900 West</td> <td>Blackfoot</td> <td>ID</td> <td>83221</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>	manager	Kevin Caldwell	223 So. 900 West	Blackfoot	ID	83221
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>										
manager	Kevin Caldwell	223 So. 900 West	Blackfoot	ID	83221										
5. Organized Under the Laws of: IDAHO W 69324		6. Signature  Date <u>10-20-08</u> Name (Typed or Printed) <u>Kevin Caldwell</u> Title <u>Manager</u>													