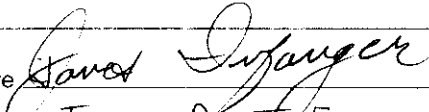
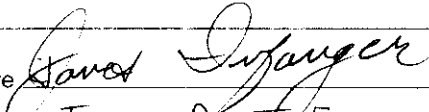
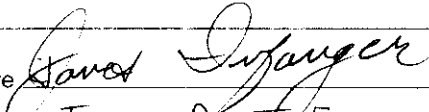


No. W 4187 Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	Due no later than Jun 30, 2004 Annual Report Form <div style="background-color: black; color: white; text-align: center; padding: 2px;">1. Mailing Address - Correct in this box, if applicable</div> JB UTILITY CONTRACTORS, LLC JAMES ROBERT INFANGER PO BOX 225 SALMON, ID 83467	2. Registered Agent and Office NO PO BOX JAMES ROBERT INFANGER 174 HWY 93 S SALMON, ID 83467 3. <u>New</u> Registered Agent Signature
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4. Limited Liability Companies: Enter Names and Addresses of Members.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Owner Member	James Infanger	PO Box 225	Salmon	ID	83467

5. Organized Under the Laws of: <div style="text-align: center;">IDAHO W 4187</div>	6. <table style="width: 100%; margin-top: 10px;"> <tr> <td style="width: 60%;">Signature </td> <td style="width: 40%;">Date <u>7-13-04</u></td> </tr> <tr> <td>Name <small>(Typed or Printed)</small> <u>James R. Infanger</u></td> <td>Title <u>Owner</u></td> </tr> </table>	Signature 	Date <u>7-13-04</u>	Name <small>(Typed or Printed)</small> <u>James R. Infanger</u>	Title <u>Owner</u>
Signature 	Date <u>7-13-04</u>				
Name <small>(Typed or Printed)</small> <u>James R. Infanger</u>	Title <u>Owner</u>				