

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000001790

FILED
Apr 19, 2006
Secretary of State

Entity Name: BOISE CASCADE HOLDINGS, L.L.C.

Current Principal Place of Business:

1111 WEST JEFFERSON STREET
BOISE, ID 83728

New Principal Place of Business:

1111 WEST JEFFERSON STREET
BOISE, ID 83702

Current Mailing Address:

1111 WEST JEFFERSON STREET
BOISE, ID 83728

New Mailing Address:

FEI Number: 20-1478587 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: ALSIKAFI, AZID F
Address: THREE FIRST NATIONAL PLAZA SUITE 3800
City-St-Zip: CHICAGO, IL 60602

Title: MGR () Delete
Name: MCGOWAN, CHRISTOPHER J
Address: THREE FIRST NATIONAL PLAZA SUITE 3800
City-St-Zip: CHICAGO, IL 60602

Title: MGR (X) Delete
Name: MENCOFF, SAMUEL M
Address: THREE FIRST NATIONAL PLAZA SUITE 3800
City-St-Zip: CHICAGO, IL 60602

Title: MGR (X) Delete
Name: SOULELES, THOMAS S
Address: THREE FIRST NATIONAL PLAZA SUITE 3800
City-St-Zip: CHICAGO, IL 60602

Title: MGR (X) Delete
Name: HARAD, GEORGE J
Address: 1111 WEST JEFFERSON STREET
City-St-Zip: BOISE, ID 83728

Title: MGR (X) Delete
Name: MADIGAN, JOHN W
Address: 435 N. MICHIGAN AVE.
City-St-Zip: CHICAGO, IL 60602

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: GOWLAND, KAREN E
Address: 1111 W. JEFFERSON ST.
City-St-Zip: BOISE, ID 83702

Title: AT (X) Change () Addition
Name: VERDUN, PATRICIA L
Address: 1111 W. JEFFERSON ST.
City-St-Zip: BOISE, ID 83702

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: PATRICIA L. VERDUN/ ASST. TREASURER

AT

04/19/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date