

STATE OF LOUISIANA
 STATE LICENSING BOARD FOR CONTRACTORS
 P. O. Box 14419 • Baton Rouge, LA 70898-4419
 2525 Quail Drive • Baton Rouge, LA 70808



**COMMERCIAL
 RENEWAL APPLICATION**
 www.lslbc.louisiana.gov
 RENEWAL APPLICATION FEES ARE NON-REFUNDABLE

MAGUIRE IRON, INC.
 P. O. Box 1446
 Sioux Falls, SD 57101-1446

PHYSICAL ADDRESS:
 MAGUIRE IRON, INC.
 1610 N. Minnesota Ave.
 Sioux Falls, SD 57104

PHONE: (605) 334-9749
 FAX PHONE: 6053349752
 EMAIL ADDRESS: gleasonk@maguireiron.com
 WEB ADDRESS:
 TYPE OF BUSINESS: CORPORATION

LICENSE # 42347

CHOOSE ONE RENEWAL OPTION BELOW: (Check one box).

For renewal and donation please make your check payable to the La. State Licensing Board for Contractors (LSLBC).

<input type="checkbox"/> RENEWAL OPTION 1	<input type="checkbox"/> RENEWAL OPTION 2	<input checked="" type="checkbox"/> RENEWAL OPTION 3
08/19/2010 - 8/19/2011	08/19/2010 - 8/19/2012	08/19/2010 - 8/19/2013
TOTAL FEES DUE: * \$125.00	TOTAL FEES DUE: * \$250.00	TOTAL FEES DUE: * \$375.00
PENALTY: \$ 50.00	PENALTY: \$ 50.00	PENALTY: \$ 50.00
(Due if received 15 days after expiration date)	(Due if received 15 days after expiration date)	(Due if received 15 days after expiration date)
LA State Univ. Donation: \$	LA State Univ. Donation: x 2 = \$	LA State Univ. Donation: x 3 = \$
Univ. of LA-Monroe Donation: \$	Univ. of LA-Monroe Donation: x 2 = \$	Univ. of LA-Monroe Donation: x 3 = \$
LA Tech Univ. Donation: \$	LA Tech Univ. Donation: x 2 = \$	LA Tech Univ. Donation: x 3 = \$
* Includes \$25 Transaction Fee per year.	* Includes \$25 Transaction Fee per year.	* Includes \$25 Transaction Fee per year.

VOLUNTARY DONATION:
 Act 352 of the 2004 Louisiana Legislature was enacted which enabled licensed contractors to participate in the education of our future leaders. Voluntary tax-deductible contributions can now be invested directly to the three presently accredited universities in their construction management programs. Above are donation options available to contractors at the renewing of license each year. To avoid delay in processing your renewal you must specify the program(s) to receive any donation made. Should you wish to divide your donation, please specify the amount to be allocated to each program. Note: Your voluntary donation will follow your renewal deferral.

CLASSIFICATION LICENSED FOR:
 SPECIALTY: STORAGE AND TANK CONSTRUCTION

Your Louisiana Commercial Contractor's license expires on **August 19, 2010**. If your renewal application is not completed and returned to this office on or before the expiration date, you will be in violation of the Contractor's License Law if you bid, contract or perform any work in the amount of \$50,000 or more (\$1 or more for hazardous) and you will be subject to all penalties of the law.

1. Corporation, Limited Partnership, or LLC license only: IS THE FIRM REGISTERED WITH THE LA. SECRETARY OF STATE?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
2. Corporation, Limited Partnership, or LLC license only: IS THE FIRM PRESENTLY IN GOOD STANDING WITH THE LA. SECRETARY OF STATE?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
3. Corporation, Limited Partnership, or LLC license only: HAS THERE BEEN ANY CHANGE IN OWNERSHIP OF THE BUSINESS ENTITY? (If YES, see paragraph B and C on the reverse side of this form for instructions.)	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
4. IS EACH QUALIFYING PARTY LISTED BELOW AN OWNER OR FULL-TIME EMPLOYEE OF YOUR FIRM? (Please mark through any qualifying party that is neither an owner nor a full-time employee.) Troy James Werdel XXX-XX-0706	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
5. PLEASE NOTE CHANGES IN SOLE PROPRIETOR, OFFICER, PARTNER OR MEMBER LISTED BELOW. (If changes are noted, see paragraph B on the reverse side of this form for instructions.) Fiscal Officer: Jones, Brad M. Vice President: Jones, Scott R. President: Jones, Gene Jr. Registered Agent: C.T. Corporation Systems	

SIGNATURE: Before signing, refer to the instructions located on the reverse to ensure that the application is properly completed. Lead based paint and/or asbestos removal or abatement contractors, please note paragraph F in the instructions.

I CERTIFY that the qualifying party(ies) listed above remain the same unless otherwise noted in #4 and that all statements, answers and representations in this application are true and accurate. I acknowledge that any false information submitted on my behalf and verified by my signature is CAUSE TO HAVE LICENSE DENIED, REVOKED OR SUSPENDED BY THE STATE LICENSING BOARD FOR CONTRACTORS.

Gene Jones Sr. President

Print NAME and TITLE of Owner or Officer

Signature of Owner or Officer

Date

SAVE TIME, RENEW ON LINE

www.lslbc.louisiana.gov

User ID: 103508

Password: 642592

08/19/2004

Renewal is delinquent fifteen days following the expiration date
 SUBMIT THIS ORIGINAL FORM. KEEP COPY FOR YOUR FILES