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|--------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-----------------------------------------------------------|---------------------|
| No. <b>W 10603</b>                                                                                                                                     |                | <b>Due no later than Dec 31, 2006</b>                                                                                                                                                       |             | <b>2. Registered Agent and Address (NO PO BOX)</b>        |                     |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                | <b>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>D J PROPERTY MANAGEMENT, LLC<br>DAVE JORGENSEN<br>5500 S MARBRISA<br>IDAHO FALLS ID 83406 |             | DAVE JORGENSEN<br>5500 S MARBRISA<br>IDAHO FALLS ID 83406 |                     |
|                                                                                                                                                        |                |                                                                                                                                                                                             |             | 3. <u>New</u> Registered Agent Signature:*                |                     |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.                                                           |                |                                                                                                                                                                                             |             |                                                           |                     |
| Office Held                                                                                                                                            | Name           | Street or PO Address                                                                                                                                                                        | City        | State                                                     | Country Postal Code |
| MANAGER                                                                                                                                                | DAVE JORGENSEN | 5500 S MARBRISA                                                                                                                                                                             | IDAHO FALLS | ID                                                        | 83406               |
| 5. Organized Under the Laws of:<br><br><b>IDAHO<br/>W 10603</b>                                                                                        |                | 6. Annual Report must be signed.*<br>Signature: David Jorgensen<br>Name (type or print): David Jorgensen<br>Date: 10/18/2006<br>Title: Manager                                              |             |                                                           |                     |
| Processed 10/18/2006                                                                                                                                   |                | * Electronically provided signatures are accepted as original signatures.                                                                                                                   |             |                                                           |                     |