

No. **W 12090**

**Due no later than May 31, 2004**

**Annual Report Form**

Return to:

SECRETARY OF STATE  
700 WEST JEFFERSON  
PO BOX 83720  
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

D.S.A. LLC  
JIM ALLEN  
PO BOX 34

FISH HAVEN, ID 83287

2. Registered Agent and Office **NO PO BOX**

JAMES L ALLEN  
53 LAKESIDE DR

FISH HAVEN, ID 83287

3. New Registered Agent Signature

**NO FILING FEE IF  
RECEIVED BY DUE DATE**

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>
MBR	JAMES ALLEN	P O BOX 34	FISH HAVEN	ID	83287
MBR	DAVIS ALLEN	P O BOX 34	FISH HAVEN	ID	83287
MBR	SANDRA ALLEN	P O BOX 34	FISH HAVEN	ID	83287

5. Organized Under the Laws of:

IDAHO  
W 12090

6.

Signature

Name (Typed or Printed)

JAMES ALLEN

Date

3/17/04

Title

MEMBER