



STATE OF IDAHO
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IDAHO ANNUAL REPORT FORM 152146

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M. PATRICK DUFFIN, PA
2677 E 17TH ST STE 500
IDAHO FALLS, ID 83406

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2008 FEB 13 PM 1:11
SECRETARY OF STATE
STATE OF IDAHO

No. C 152146 Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	Due no later than December 31, 2007 Annual Report Form 1. Mailing Address - Correct in this box if applicable M. PATRICK DUFFIN, PA 2677 E 17TH ST STE 500 IDAHO FALLS, ID 83406 6302 Sharptail Road Ammon, Idaho 83406	2. Registered Agent and Office NO PO BOX M PATRICK DUFFIN 2677 E 17TH ST STE 500 IDAHO FALLS, ID 83406 3160 E 17th St, Suite 150 Ammon, Idaho 83406 3. New Registered Agent Signature																		
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>President</td> <td>M. Patrick Duffin</td> <td>3160 E 17th St, Suite 150</td> <td>Ammon</td> <td>ID</td> <td>83406</td> </tr> <tr> <td>Secretary</td> <td>Tricia Duffin</td> <td>3160 E. 17th St. Suite 150</td> <td>Ammon</td> <td>ID</td> <td>83406</td> </tr> </tbody> </table>			Office held	Name	Street or P.O. Address	City	State	Zip	President	M. Patrick Duffin	3160 E 17th St, Suite 150	Ammon	ID	83406	Secretary	Tricia Duffin	3160 E. 17th St. Suite 150	Ammon	ID	83406
Office held	Name	Street or P.O. Address	City	State	Zip															
President	M. Patrick Duffin	3160 E 17th St, Suite 150	Ammon	ID	83406															
Secretary	Tricia Duffin	3160 E. 17th St. Suite 150	Ammon	ID	83406															
5. Organized Under the Laws of: IDAHO C 152146	6. Signature <u>M. Patrick Duffin</u> Date <u>2.13.08</u> Name (Typed or Printed) <u>M. Patrick Duffin</u> Title <u>President</u>																			

Issued 10/01/2007

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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

BLOCK 1: Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. Note: To ensure future mailings, the corrected address must be inside Block 1.

BLOCK 2: To change the registered agent or office, strike the incorrect information and write in the correct information. Note: The office of the registered agent must be at a street address in Idaho; not a Post Office Box or Personal Mail Box

BLOCK 3: Only a new registered agent must sign in Block 3.

BLOCK 4: Enter names and business addresses of president, secretary, and directors (for corporations only), managers/members (for LLC's Only), one or more general partners (for LP's only). Note: Putting "same as last year" or "same as above" or leaving the block blank will not be accepted. Changes here will not affect the address in Block 1. Be sure to include office held for each name listed.

BLOCK 5: May not be altered through the use of this form.

BLOCK 6: The annual report must be signed by a person authorized to represent the corporation/LLC/LP. Print or type the name and title of the signer below the signature.

** The image of this form will be available on the Internet once it is filed. DO NOT enter Social Security Numbers.

If the (Corporation/Limited Liability Company/Limited Partnership) is no longer doing business in Idaho, you may file the appropriate form and fee. Forms are available on our website at www.idsos.state.id.us. However, if no timely annual report is filed, administrative action will be taken, at no cost to the (Corporation/Limited Liability Company/Limited Partnership), to terminate the legal existence. If you have any questions contact the Commercial Division at (208) 334-2301.

DUE NO LATER THAN DECEMBER 31, 2007
POSTMARK DATES WILL NOT BE ACCEPTED