

No. C 41830	Due no later than Jan 31, 2011 Annual Report Form	2. Registered Agent and Address (NO PO BOX)				
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. PARTS SERVICE, INC. DAVID ADAMS P.O. BOX 409 REXBURG ID 83440 USA	DAVID ADAMS 160 NORTH SECOND EAST REXBURG ID 83440 3. <u>New</u> Registered Agent Signature:*				
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
DIRECTOR	ROBERT JOHNSON	P.O. BOX 409	REXBURG	ID	USA	83440
PRESIDENT	DAVID ADAMS	P.O. BOX 409	REXBURG	ID	USA	83440
SECRETARY	KRISTY JOHNSON	P.O. BOX 409	REXBURG	ID	USA	83440
5. Organized Under the Laws of: ID C 41830	6. Annual Report must be signed.* Signature: David Adams Name (type or print): David Adams		Date: 11/30/2010 Title: President			
Processed 11/30/2010		* Electronically provided signatures are accepted as original signatures.				