

No. C 54743

Annual Report Form  
Due No Later Than November 30, 19962. Registered Agent and Office **NOT A P.O. BOX**

Return to:  
**SECRETARY OF STATE**  
**700 WEST JEFFERSON**  
**PO BOX 83720**  
**BOISE, ID 83720-0080**  
**NO FEE REQUIRED**

1. Mailing Address - Please Correct, If Not Correct

DAVID M. COOPER, C.P.A., P.A.  
 DAVID COOPER  
 P O BOX 394

DAVID COOPER  
 155 2ND AVENUE NORTH  
 TWIN FALLS ID 83301

3. Organized Under the Laws of:

\* FIRST NOTICE \* TWIN FALLS ID 83303 3394 ID C 54743

## 4. Corporations: Enter Names and Addresses of President, Secretary and Directors

- Limited Liability Companies: Enter Names and Addresses of  Managers or  Members (check one)

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
PRESIDENT	DAVID M. COOPER	P.O.BOX 394	TWIN FALLS	ID	83303
SECRETARY	BONNIE HARPSTER	P.O.BOX 394	TWIN FALLS	ID	83303
DIRECTOR	DAVID M. COOPER	P.O.BOX 394	TWIN FALLS	ID	83303

5. **NATURE OF BUSINESS**  
**ACCOUNTING**

6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.

Signature Bonnie J. Harpster Date 10/9/96Name (Typed or Printed) BONNIE J. HARPSTER Title SECRETARY

ISSUED: 07-06-1996

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