

|                                                                                                                                                        |              |                                                                                                                                                                    |        |                                                     |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|-----------------------------------------------------|---------|-------------|--|
| No. <b>C 97720</b>                                                                                                                                     |              | <b>Due no later than Feb 29, 2012</b>                                                                                                                              |        | 2. Registered Agent and Address <b>(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>DHS, INC.<br>DR. JOHN DAY<br>105 COUNTRY LANE<br>JEROME ID 83338 |        | DR. JOHN DAY<br>105 COUNTRY LANE<br>JEROME ID 83338 |         |             |  |
|                                                                                                                                                        |              |                                                                                                                                                                    |        | 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 |  |
| PRESIDENT                                                                                                                                              | JOHN D DAY   | 105 COUNTRY LANE                                                                                                                                                   | JEROME | ID                                                  | USA     | 83338       |  |
| SECRETARY                                                                                                                                              | LAURIE L DAY | 105 COUNTRY LANE                                                                                                                                                   | JEROME | ID                                                  | USA     | 83338       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>C 97720</b>                                                                                           |              | 6. Annual Report must be signed.*<br>Signature: Laurie L. Day<br>Name (type or print): Laurie L. Day                                                               |        |                                                     |         |             |  |
| Date: 12/09/2011<br>Title: Secretary                                                                                                                   |              |                                                                                                                                                                    |        |                                                     |         |             |  |
| Processed 12/09/2011                                                                                                                                   |              | * Electronically provided signatures are accepted as original signatures.                                                                                          |        |                                                     |         |             |  |