

No. C 142630

Due no later than February 28, 2009

## Annual Report Form

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

Return to:

SECRETARY OF STATE  
450 NORTH FOURTH STREET  
PO BOX 83720  
BOISE, ID 83720-0080

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

DALE DICKINSON, P.A.  
DALE DICKINSON  
85 HORSESHOE CIRCLE  
JEROME, ID 83338

DALE DICKINSON  
85 HORSESHOE CIRCLE  
JEROME, ID 83338

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

3. New Registered Agent Signature

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

Office heldNameStreet or P.O. AddressCityStateZip

*Pres* *Dale Dickinson Dr.* *85 Horseshoe Cir* *Jerome* *ID* *83338*

*Sec/Treas* *Muriel Dickinson* *85 Horseshoe Cir* *Jerome* *ID* *83338*

5. Organized Under the Laws of:

IDAHO  
C 142630

6.

Signature

Date

*2/19/09*

Name (Typed or Printed)

*Dale Dickinson Dr.*

Title

*Pres.*

Issued 12/01/2008

Do Not Tape or Staple

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