No. W 3478	Due no later than January 31, 2006	
Return to:	Annual Report Form	2. Registered Agent and Office NO PO BC
SECRETARY OF STATE	1. Mailing Address - Correct in this box, if applicable	MICHAEL D PARKE
700 WEST JEFFERSON	PARKE'S MAGIC VALLEY FUNERAL HOME &	3225 N 27TH
PO BOX 83720	MICHAEL D PARKE	BOISE, ID 83702
BOISE, ID 83720-0080	2551 KIMBERLY RD	
	TWIN FALLS, ID 83301	
NO FILING FEE IF		3. New Registered Agent Signature
RECEIVED BY DUE DATE		James Algorit Olgrature
4. Limited Liability Companie	es: Enter Names and Addresses of Managers.	
Office held Name		
- Name	Street or P.O. Address	<u>City State </u>
$\mathcal{N}^{\mathcal{C}}$	CHUNGE	
Victor mile.	Parke 2351 k , mberly Ad	7017 Falls, 2d 83301
Director cutter	PARTE 2551 K MBerly Ad	7019 Falls, Id 83301
	PARTE 2551 K I MESCULY Ad	1019 Fq/18, Id 83301
5. Organized Under the Laws of:	FARTE 2351 to 1 Medically Ad with factor 11	7-619 Fq/ls, Id 83301
5. Organized Under the Laws of: IDAHO	6.	>
5. Organized Under the Laws of:	6. Signature	>
5. Organized Under the Laws of: IDAHO	6.	7017 Fq/ls, Id 83301 11 11 2 2 2 2 3 301 11 11 11 11 11 11 11 11 11 11 11 11 1