

No. C 116997

Due no later than November 30, 2007
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

JOHN A. COLEMAN, CHTD.
JOHN A. COLEMAN
P.O. BOX 1293
TWIN FALLS, IDJOHN A. COLEMAN
401 2ND ST. NO. GOODING ST. N. #201
TWIN FALLS, ID 83303NO FILING FEE IF
RECEIVED BY DUE DATE3. New Registered Agent Signature

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

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President	John A Coleman	PO Box 1293	Twin Falls	ID	83303-1293

5. Organized Under the Laws of:
IDAHO
C 116997

6.

Signature

Name

(Type or
Printed)

John A Coleman

Date

12 Sep 07

Title

President

Issued 09/04/2007

Do Not Tape or Staple

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