

No. C 43827

Due no later than May 31, 2004
Annual Report Form2. Registered Agent and Office **NO PO BOX**Return to:
SECRETARY OF STATE
700 WEST JEFFERSON
PO BOX 83720
BOISE, ID 83720-0080

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

PARRISH MOVING SPECIALTIES, INC.
EUGENE PARRISH
~~BOX 504~~ P.O. Box 504EUGENE B PARRISH
29 WEST 50 SOUTH MITCHELL RD

BLACKFOOT, ID 83221

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

BLACKFOOT, ID 83221

3. 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>
OWNER	EUGENE PARRISH	P.O. Box 504	Blackfoot	ID	83221
OWNER	ANGIELEN PARRISH	P.O. Box 504	Blackfoot	ID	83221

5. Organized Under the Laws of:

IDAHO
C 43827

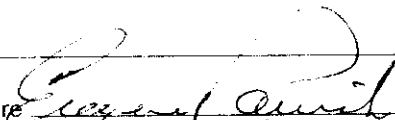
6.

Signature

Name (Typed or Printed)

Date

Title


Eugene Parrish

4-13-04

Pres