

No. W 2043	Due no later than February 29, 2008 Annual Report Form		2. Registered Agent and Office NO PO BOX TRAVIS L. BOWEN, P.C. 1906 JENNIE LEE DR. IDAHO FALLS, ID 83404												
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable! DP MANAGEMENT, L.C. DANIEL T POLATIS 131 S 1075 W BLACKFOOT, ID 83221		3. New Registered Agent Signature												
4. Limited Liability Companies: Enter Names and Addresses of Managers. <table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>Operating manager</td> <td>Daniel T Polatis</td> <td>131 S 1075 W</td> <td>Blackfoot</td> <td>ID</td> <td>83221</td> </tr> </tbody> </table>				Office held	Name	Street or P.O. Address	City	State	Zip	Operating manager	Daniel T Polatis	131 S 1075 W	Blackfoot	ID	83221
Office held	Name	Street or P.O. Address	City	State	Zip										
Operating manager	Daniel T Polatis	131 S 1075 W	Blackfoot	ID	83221										
5. Organized Under the Laws of: IDAHO W 2043	6. Signature <i>[Signature]</i> Name (Typed or Printed) <u>Daniel T Polatis</u>			Date <u>2-1-08</u> Title <u>Operating Manager</u> 200802004818											

Do Not Tape or Staple