

No. **W 9926**

**Due no later than October 31, 2005**

**Annual Report Form**

2. 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

D P P SERVICES, L.L.C.

~~660 NINA~~

REXBURG, ID 83440

*654 MEADOW BROOK*

DAVID E PARKINSON

~~660 NINA~~ *654 MEADOW BROOK*

REXBURG, ID 83440

3. New Registered Agent Signature

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

4. Limited Liability Companies: Enter Names and Addresses of Members.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
MANAGER	DAVID PARKINSON	654 MEADOW BROOK	REXBURG,	ID	83440
MEMBER	PENNY PARKINSON	654 MEADOW BROOK	REXBURG,	ID	83440

5. Organized Under the Laws of:

IDAHO  
W 9926

6.

Signature

Date

*8/8/05*

Name

(Typed or Printed)

*DAVID PARKINSON*

Title

*MANAGER*