

No. <b>W 48007</b>		<b>Due no later than Mar 31, 2014</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		<b>1. Mailing Address: Correct in this box if needed.</b>  DCCK PROPERTIES, L.L.C. CONNIE STORRER 1042 WILDWOOD WAY TWIN FALLS ID 83301		CONNIE STORRER 1042 WILDWOOD WAY TWIN FALLS ID 83301			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MANAGER	CONNIE STORRER	1042 WILDWOOD WAY	TWIN FALLS	ID	USA	83301	
MANAGER	DIANN W CRAGUN	1042 WILDWOOD WAY	TWIN FALLS	ID	USA	83301	
5. Organized Under the Laws of:  <b>ID</b> <b>W 48007</b>		6. Annual Report must be signed.*  Signature: Connie Storrer Name (type or print): Connie Storrer					
		Date: 02/14/2014 Title: Manager					
Processed 02/14/2014      * Electronically provided signatures are accepted as original signatures.							