

**2. Registered Agent and Office NO PO BOX**

## Annual Report Form

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

BRUCE C. PARKER, C.P.A., CHARTERED  
BRUCE PARKER  
7235 W EMERALD STE A  
BOISE, ID 83704

BRUCE PARKER  
7235 W EMERALD STE A  
BOISE, ID 83704

**3. New Registered Agent Signature**

Return to:

SECRETARY OF STATE  
700 WEST JEFFERSON  
PO BOX 83720  
BOISE, ID 83720-0080

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

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

**Office held**

Name

**Street or P.O. Address**

City

**State**

**Zip**

<u>Office held</u>	<u>Name</u>	<u>Street or Post Address</u>
PRESIDENT	BRUCE PARKER	7335 W. EMERALD SUITE A BOISE, ID 83704

**5. Organized Under the Laws of:**

IDAHO  
C 63163

**6.**

**Signature**

Date \_\_\_\_\_

12-11-06

Name

(Typed or  
Printed)

FRANK PARKER

**Title**

Res

Issued 12/01/2006

**Do Not Tape or Staple**

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