## REINSTATEMENT

No. C 92416  Return to: 1 Mailing	Annual Report Form  ADMIN DISSOLVED 08/07/2002  Address Correct in this box if applicable	Ad Jan	gent and Office NOT ARO. BOX
SECRETARY OF STATE  700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  RIVER'S	S EDGE HOMEOWNERS ASSOCIATION DE MANAGEMENT X 44869		NIEW- 1.STATE ST. -83704 83703
	BOX 140273 J ID 83741 83 702	3 New registe	ared agent signature  Couplant
Corporations: Enter Names and Business Ad Limited Liability Companies: Enter Names and	dresses of President, Secretary and Directors d Addresses of		AGING AGENT
CARL GOICOECHEA	Street or P.O. Address 6151 N. DRAKE 6121 N. WIDGEON	BoisE	<u>State Zip</u> エム 837/4
MIKE FALCONER LARRY STROUGH STEVE PORTER	8660 ATWATER 6120 DRAKE WAY 8550 W. ATWATER	11 11	10 11 10 11
5. Organized under the laws of: IDAHO C 92416	6. Signature Carlo Men, Name (Typed or CARLA EVERA	hart Date	Accor Mar

## INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

- Block 1: Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. Note: To ensure future mailings, the corrected address must be inside Block 1.
- Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. Note: The office of the registered agent must be at a street address in Idaho; not a Post Office Box or Personal Mail Box.
- Block 3: Only a <u>new</u> registered agent must sign in Block 2.
- Block 4: Enter names and business addresses of president, secretary, and directors (for corporations only) or managers/ members (for LLC's only). Note: Putting "same as last year" or "same as above" will not be accepted.
- Block 5: May not be altered through the use of this form.
- **Block 6**: The annual report must be signed by a person authorized to represent the corporation/LLC. Print or type the name and title of the signer below the signature.