

| No. C105045 Return to: SECRETARY OF STATE 700 WEST JEFFERS PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED ** FINAL NOTICE ** | Annual Report Form Due No Later Than November 30, 1997 1. Mailing Address - Please Correct, If Not Correct COYOTE FLATS HOMEOWNER'S ASS PO BOX 482 VICTOR ^{ID} MT 83455 | 2. Registered Agent and Office NOT A P.O. BOX SAM LEA 40 NORTH MAIN DRIGGS ID 83422 3. Organized Under the Laws of: ID C105045 | | | | | | | | | | | | | | | | | | |
|--|---|--|-------------------|----------------------|------------------------|----------------|-------------------------|----------------------|------------------|-------------------|----------------------------------|-------------------|--------------|--|------------------------------|-----------------------|-------------------|-------------------|--------------|--|
| 4. Corporations Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one) <table border="0"> <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>PRESIDENT</td> <td>MARY SHOUF</td> <td>PO BOX 483 482</td> <td>VICTOR, ID</td> <td>83455</td> <td></td> </tr> <tr> <td>VICE-PRESIDENT/TREAS.</td> <td>TAYLOR PIGGOTT</td> <td>PO BOX 482</td> <td>VICTOR, ID</td> <td>83455</td> <td></td> </tr> </tbody> </table> | | | Office held | Name | Street or P.O. Address | City | State | Zip | PRESIDENT | MARY SHOUF | PO BOX 483 482 | VICTOR, ID | 83455 | | VICE-PRESIDENT/TREAS. | TAYLOR PIGGOTT | PO BOX 482 | VICTOR, ID | 83455 | |
| Office held | Name | Street or P.O. Address | City | State | Zip | | | | | | | | | | | | | | | |
| PRESIDENT | MARY SHOUF | PO BOX 483 482 | VICTOR, ID | 83455 | | | | | | | | | | | | | | | | |
| VICE-PRESIDENT/TREAS. | TAYLOR PIGGOTT | PO BOX 482 | VICTOR, ID | 83455 | | | | | | | | | | | | | | | | |
| 5. | 6. <table border="0"> <tr> <td>Signature</td> <td><u>Mary S. Shouf</u></td> <td>Date</td> <td><u>12/1/97</u></td> </tr> <tr> <td>Name (Typed or Printed)</td> <td><u>MARY S. SHOUF</u></td> <td>Title</td> <td><u>PRESIDENT</u></td> </tr> </table> | | Signature | <u>Mary S. Shouf</u> | Date | <u>12/1/97</u> | Name (Typed or Printed) | <u>MARY S. SHOUF</u> | Title | <u>PRESIDENT</u> | | | | | | | | | | |
| Signature | <u>Mary S. Shouf</u> | Date | <u>12/1/97</u> | | | | | | | | | | | | | | | | | |
| Name (Typed or Printed) | <u>MARY S. SHOUF</u> | Title | <u>PRESIDENT</u> | | | | | | | | | | | | | | | | | |

ISSUED: 10-04-1997

(DO NOT TAPE OR STAPLE)

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