

| | | | | | | |
|--|-----------------|---|-------|--|---------|-------------|
| No. C 78063 | | Due no later than Mar 31, 2009 | | 2. Registered Agent and Address (NO PO BOX) | | |
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE | | Annual Report Form 1. Mailing Address: Correct in this box if needed. PIERCE PARK HOMEOWNERS ASSOCIATES, INC. P. O. BOX 5714 BOISE ID 83705 | | ASSOCIATION MANAGEMENT INC 1521 E BOISE AVE BOISE ID 83706 | | |
| | | | | 3. <u>New</u> Registered Agent Signature:* | | |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional). | | | | | | |
| Office Held | Name | Street or PO Address | City | State | Country | Postal Code |
| PRESIDENT | BARBARA SVETICH | PO BOX 5714 | BOISE | ID | USA | 83705 |
| DIRECTOR | LOU CAPELLI | PO BOX 5714 | BOISE | ID | USA | 83705 |
| DIRECTOR | GARY NALL | PO BOX 5714 | BOISE | ID | USA | 83705 |
| SECRETARY | TERESA BROWNING | PO BOX 5714 | BOISE | ID | USA | 83705 |
| DIRECTOR | BRENT WILSON | PO BOX 5714 | BOISE | ID | USA | 83716 |
| 5. Organized Under the Laws of: ID C 78063 | | 6. Annual Report must be signed.* Signature: Kathryn Norton Name (type or print): Kathryn Norton Date: 01/13/2009 Title: Office Assistant | | | | |
| Processed 01/13/2009 | | * Electronically provided signatures are accepted as original signatures. | | | | |