No. C 151605 Return to:		Due no later than Nov 30, 2009		2. Registered Agent and Address (NO PO BOX) ARTHUR B MACOMBER 408 E SHERMAN AVE STE 215 COEUR D'ALENE ID 83814 3. New Registered Agent Signature:*				
		Annual Report Form						
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed.						
		SUNSHINE MEADOW OWNERS ASSOCIATION, INC. PO BOX 3450 POST FALLS ID 83877						
		4. Corporations: Enter Na	ames and Busin	ess Addresses of Pres	sident, Secretary, and Director	rs. Treasurer (optional).	
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
DIRECTOR	OR BILL CALDARONI		C/O ABC MANAGEMENT	PO BOX 3450	POST FALLS	ID	USA	83877
SECRETARY LECRETIA D		ONOHUE - REED	C/O ABC MANAGEMENT	PO BOX 3450	POST FALLS	ID	USA	83877
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Stephanie Givens		Date: 09/25/2009				
C 151605		Name (type or print): Stephanie Givens		Title: Property Manager				
Processed 09/25/2009		* Electronically provide	3 2	9				