No. C 143871 Return to:		Due no later than May 31, 2009 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
					PATTI KARI		
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. MACAILE MEADOWS NEIGHBORHOOD ASSOCIATION, INC. PATTI KARI BOISE CITY PROPERTY MANAGEMENT 919 N 27TH ST. SUITE A BOISE ID 83702		4948 KOOTENAI STE 205 BOISE ID 83705 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		BOISE ID 83702		3. <u>1.c.r.</u> registered Agent Signature.			
4. Corporations: Enter	r Names and Busin	ess Addresses of Pr	esident, Secretary, and Directors. Treasure	er (optional).			
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
DIRECTOR PRESIDENT TREASURER	CHAD STON DARCI RICH	ARDS	945 N MIDDLEMIST PL 941 N STOLLE PL 971 N PARKDALE	MERIDIAN MERIDIAN MERIDIAN	ID ID	USA USA USA	83642 83642 83642
SECRETARY	PAULA NEED		919 N STOLLE PL	MERIDIAN	ID	USA	83642
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID		Signature: Patricia Kari		Date: 05/28/2009			
C 143871		Name (type or print): Patricia Kari		Title: Community Manager			
Processed 05/28/2009		* Electronically pro	vided signatures are accepted as original si	gnatures.		_	