

No. C 70294	Due no later than Jul 31, 2010 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) JANNACE KIRKDORFFER 1277 TWIN VILLA LOOP TWIN FALLS ID 83301
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. MAGIC VALLEY MOBILE HOME HOMEOWNERS ASSOCIATION, INC. 1277 TWIN VILLA LP TWIN FALLS ID 83301		3. <u>New</u> Registered Agent Signature.
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors and (optional) Treasurer.			
Office Held	Name	Street or PO Address	City State Country Postal Code
President	Jannace L Kirkdorffer	145 Twin Circle	Twin Fall ID, Twin 83301
Vice President	Doris Pope	1236 Twin Villa Loop	Twin Fall ID, Twin 83301
Sec-Tres	Judy Grady	162 Twin Circle	Twin Fall, ID, Twin 83301
Board of Directors	Carolyn Hanson	211 Villacircle	Twin Fall, ID, Twin 83301
	Lisa Feriante	1232 Twin Villa Loop	Twin Fall, ID, Twin 83301
	Olela Bybee	1214 Twin Villa Loop	Twin Falls, ID, Twin 83301
	Kent Scott	died Not Replaced yet	Twin Fall, ID Twin 83301
Architectural Directors	Ruth Scott	189 Twin Circle	Twin Fall, ID Twin 83301
	Diane Mausteller	5500 Job dot o Health	
5. Organized Under the Laws of:	6. Signature: <u>Jannace L. Kirkdorffer, Pres</u> Date: <u>8-4-2010</u> Name (type or print): <u>Jannace L Kirkdorffer, Pres</u> Title: <u>8-4-2010</u>		
IDAHO C 70294			

Issued 06/30/2010 by DK1

100642

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Entity name may not be altered through the use of this form. 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. ~~Make sure to use the correct address.~~