

|                                                                                                                                                        |                  |                                                                                                                                                      |            |                                                         |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|------------|---------------------------------------------------------|---------|-------------|--|
| No. <b>C 140370</b>                                                                                                                                    |                  | <b>Due no later than Aug 31, 2011</b>                                                                                                                |            | <b>2. Registered Agent and Address (NO PO BOX)</b>      |         |             |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                  | <b>Annual Report Form</b>                                                                                                                            |            | SALLY ANN LOWRY<br>337 SUNDOWNER LANE<br>SAGLE ID 83860 |         |             |  |
|                                                                                                                                                        |                  | <b>1. Mailing Address: Correct in this box if needed.</b><br>SUNSET BAY OWNERS ASSOCIATION, INC.<br>BILL BROWN<br>108 S 2ND ST<br>SANDPOINT ID 83864 |            | 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 |  |
| DIRECTOR                                                                                                                                               | RAY ZIMMERMAN    | 7535 N SAN MANUEL RD                                                                                                                                 | SCOTTSDALE | AZ                                                      | USA     | 85258       |  |
| DIRECTOR                                                                                                                                               | GEORGINA PUAILOA | 317 SUNDOWNER LN                                                                                                                                     | SAGLE      | ID                                                      | USA     | 83860       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>C 140370</b>                                                                                          |                  | 6. Annual Report must be signed.*<br>Signature: Bill Brown<br>Name (type or print): Bill Brown<br>Date: 08/04/2011<br>Title: Member                  |            |                                                         |         |             |  |
| Processed 08/04/2011                                                                                                                                   |                  | * Electronically provided signatures are accepted as original signatures.                                                                            |            |                                                         |         |             |  |