

|                                                                                                                                                        |                      |                                                                                                                                                |        |                                                                   |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|------------------------------------------------------------------------------------------------------------------------------------------------|--------|-------------------------------------------------------------------|---------|-------------|--|
| No. <b>C 176950</b>                                                                                                                                    |                      | <b>Due no later than Jan 31, 2009</b>                                                                                                          |        | 2. Registered Agent and Address <b>(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>1. Mailing Address: Correct in this box if needed.</b><br><br>ALPINE VILLAGE ASSOCIATION, INC.<br>1101 W RIVER ST STE 300<br>BOISE ID 83702 |        | MICHAEL B HORMAECHEA<br>1101 W RIVER ST STE 300<br>BOISE ID 83702 |         |             |  |
|                                                                                                                                                        |                      |                                                                                                                                                |        | 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                                                                                                                                              | MICHAEL B HORMAECHEA | 1101 W RIVER ST SUITE 300                                                                                                                      | BOISE  | ID                                                                | USA     | 83702       |  |
| TREASURER                                                                                                                                              | AMY H WRAY           | 1101 W RIVER ST STE 300                                                                                                                        | BOISE  | ID                                                                | USA     | 83702       |  |
| SECRETARY                                                                                                                                              | KRISTIN AMARANTE     | 600 N 3RD ST                                                                                                                                   | MCCALL | ID                                                                | USA     | 83638       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>C 176950</b>                                                                                          |                      | 6. Annual Report must be signed.*<br>Signature: Amy H. Wray<br>Name (type or print): Amy H. Wray<br>Date: 12/08/2008<br>Title: Treasurer       |        |                                                                   |         |             |  |
| Processed 12/08/2008                                                                                                                                   |                      | * Electronically provided signatures are accepted as original signatures.                                                                      |        |                                                                   |         |             |  |