No. <b>C 175486</b>		Due no later than Oct 31, 2015 Annual Report Form		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)  THOMAS J KATSILOMETS 639 UNIVERSITY DR POCATELLO ID 83201			
Return to:								
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  PANORAMA SUBDIVISION HOMEOWNERS' ASSOCIATION, INC.  THOMAS J KATSILOMETES PO BOX 11 POCATELLO ID 83204						
				POCATELLO				
				3. <u>New</u> Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Corporations: Enter Nan	nes and Busin	ess Addresses of P	President, Secretary, and Directors. Treasure	er (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	THOMAS J KATSILOMETES		P.O. BOX 11	POCATELLO	ID	USA	83204	
SECRETARY	CRETARY ANNA SPEROS		639 UNIVERSITY DR	POCATELLO	ID	USA	83201	
DIRECTOR	K MATHEWS		P.O. BOX 11	POCATELLO	ID	USA	83204	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 175486		Signature: Thomas J. Katsilometes Date: 09/30/2015					l5	
		Name (type or		Title: President				
Processed 09/30/2015	cessed 09/30/2015 * Electronically provided signatures are accepted as original signatures.							