

No. C 215519	Due no later than Oct 31, 2018 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. HOMEOWNERS OF ALPINE POINT ASSOCIATION, INC. JOHN MAGNUSON PO BOX 2350 COUR D ALENE ID 83816		JOHN MAGNUSON 1250 NORTHWOOD CENTER CT STE A COUR D ALENE ID 83814			
			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	TODD STAM	1831 N LAKEWOOD DR STE A	COUR D ALENE	ID		83814
DIRECTOR	ZETTA STAM	1831 N LAKEWOOD DR STE A	COUR D ALENE	ID		83814
DIRECTOR	ERIK CAMPBELL	1831 N LAKEWOOD DR STE A	COUR D ALENE	ID		83814
5. Organized Under the Laws of: ID C 215519	6. Annual Report must be signed.* Signature: Timarie Lindquist Name (type or print): Timarie Lindquist		Date: 08/27/2018 Title: customer care			
Processed 08/27/2018		* Electronically provided signatures are accepted as original signatures.				