

**FILED EFFECTIVE****REINSTATEMENT**

| <b>No. C 110200</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <b>Annual Report Form</b><br><b>FORFEITED 12/02/1996</b>                                                                                                                                                          |                                                                                                                                                                                                                                                                | <b>2. Registered Agent and Office NOT A P.O. BOX</b>                                                                                                                                             |                    |                           |                               |                |                         |                           |                     |                  |  |  |  |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|---------------------------|-------------------------------|----------------|-------------------------|---------------------------|---------------------|------------------|--|--|--|--|
| <b>Return to:</b><br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>FEE DUE \$30.00</b>                                                                                                                                                                                                                                                                                                                                                                                               | <b>1 Mailing Address - Correct in this box if applicable</b><br><br>TWIN RIVER RANCH PROPERTY OWNERS' A<br>ROBERT J GERBER<br>665 SIMMONDS ROAD<br>P.O. Box 130<br>White Bird, ID 83554<br>WILLIAMSTOWN, MA 01267 |                                                                                                                                                                                                                                                                | DEAN A SATRAPE <i>Dennis Albers</i><br>MAIN STREET<br>401 West North St.<br>WHITEBIRD, ID 83554<br>Grangeville, ID 83530<br><br><b>3. New registered agent signature</b><br><i>Dennis Albers</i> |                    |                           |                               |                |                         |                           |                     |                  |  |  |  |  |
| <b>4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors</b><br><b>Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one)</b><br><br><table border="0"><thead><tr><th><u>Office held</u></th><th><u>Name</u></th><th><u>Street or P.O. Address</u></th><th><u>City</u></th><th><u>State</u></th><th><u>Zip</u></th></tr></thead><tbody><tr><td colspan="6"><i>See attached</i></td></tr></tbody></table> |                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                |                                                                                                                                                                                                  | <u>Office held</u> | <u>Name</u>               | <u>Street or P.O. Address</u> | <u>City</u>    | <u>State</u>            | <u>Zip</u>                | <i>See attached</i> |                  |  |  |  |  |
| <u>Office held</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <u>Name</u>                                                                                                                                                                                                       | <u>Street or P.O. Address</u>                                                                                                                                                                                                                                  | <u>City</u>                                                                                                                                                                                      | <u>State</u>       | <u>Zip</u>                |                               |                |                         |                           |                     |                  |  |  |  |  |
| <i>See attached</i>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                |                                                                                                                                                                                                  |                    |                           |                               |                |                         |                           |                     |                  |  |  |  |  |
| <b>5. Organized under the laws of:</b><br><br>IDAHO<br>C 110200                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                   | <b>6.</b><br><br><table border="0"><tr><td>Signature</td><td><i>Larry S. Partridge</i></td><td>Date</td><td><i>9/24/03</i></td></tr><tr><td>Name (Typed or Printed)</td><td><i>Larry S. Partridge</i></td><td>Title</td><td><i>President</i></td></tr></table> |                                                                                                                                                                                                  | Signature          | <i>Larry S. Partridge</i> | Date                          | <i>9/24/03</i> | Name (Typed or Printed) | <i>Larry S. Partridge</i> | Title               | <i>President</i> |  |  |  |  |
| Signature                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | <i>Larry S. Partridge</i>                                                                                                                                                                                         | Date                                                                                                                                                                                                                                                           | <i>9/24/03</i>                                                                                                                                                                                   |                    |                           |                               |                |                         |                           |                     |                  |  |  |  |  |
| Name (Typed or Printed)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <i>Larry S. Partridge</i>                                                                                                                                                                                         | Title                                                                                                                                                                                                                                                          | <i>President</i>                                                                                                                                                                                 |                    |                           |                               |                |                         |                           |                     |                  |  |  |  |  |

Issued 09/22/2003

Twin River Ranch Property Owners' Association  
No. C 110200  
Officers and Directors

| <u>Office Held</u> | <u>Name</u>     | <u>Street or P.O. Address</u> | <u>City</u> | <u>State</u> | <u>Zip</u> |
|--------------------|-----------------|-------------------------------|-------------|--------------|------------|
| President          | Larry Partridge | HC01 Box 125B                 | White Bird  | ID           | 83554      |
| Vice President     | George Ricks    | P.O. Box 72                   | White Bird  | ID           | 83554      |
| Secretary          | Virginia Jessen | P.O. Box 169                  | White Bird  | ID           | 83554      |
| Treasurer          | Al Bolden       | P.O. Box 126                  | White Bird  | ID           | 83554      |
| Director           | Ruth Blair      | P.O. Box 148                  | White Bird  | ID           | 83554      |
| Director           | Barbara Macy    | P.O. Box 85                   | White Bird  | ID           | 83554      |
| Director           | Bill Brimmer    | HC01 Box 125C                 | White Bird  | ID           | 83554      |
| Director           | Randy Olson     | P.O. Box 172                  | White Bird  | ID           | 83554      |
| Director           | Lew Thompson    | P.O. Box 99                   | White Bird  | ID           | 83554      |
| Director           | Ken Davis       | P.O. Box 168                  | White Bird  | ID           | 83554      |