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|--------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|-----------------------------------------------------------|---------|-------------|--|
| No. <b>C 164913</b>                                                                                                                                    |                 | <b>Due no later than Feb 28, 2015</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>MESA VIEW ESTATES SUBDIVISION HOMEOWNERS<br>ASSOCIATION, INC.<br>CHASE ROBERTSON<br>PO BOX 62<br>HAMMETT ID 83627 |         | CHASE ROBERTSON<br>39774 INDIAN HILLS RD<br>HAMMETT 83627 |         |             |  |
|                                                                                                                                                        |                 |                                                                                                                                                                                    |         | 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                                                                                                                                               | JEREMY THOMAS   | PO BOX 5                                                                                                                                                                           | HAMMETT | ID                                                        | USA     | 83627       |  |
| DIRECTOR                                                                                                                                               | CONRAD E THOMAS | PO BOX 5                                                                                                                                                                           | HAMMETT | ID                                                        | USA     | 83627       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>C 164913</b>                                                                                          |                 | 6. Annual Report must be signed.*<br>Signature: Chase Robertson<br>Name (type or print): Chase Robertson                                                                           |         |                                                           |         |             |  |
|                                                                                                                                                        |                 | Date: 12/15/2014<br>Title: Agent                                                                                                                                                   |         |                                                           |         |             |  |
| Processed 12/15/2014                                                                                                                                   |                 | * Electronically provided signatures are accepted as original signatures.                                                                                                          |         |                                                           |         |             |  |