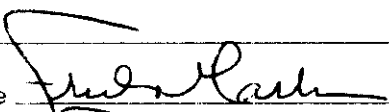


No. C 144159	Due no later than June 30, 2005 Annual Report Form	2. Registered Agent and Office NO PO BOX FRED N CARLSON 6965 NORTH 5TH WEST IDAHO FALLS, ID 83402																								
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable IDAHO CITY ESTATES OWNERS ASSOCIATI 6965 NORTH 5TH WEST IDAHO FALLS, ID 83402	3. <u>New</u> Registered Agent Signature																								
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 10%;">Office held</th> <th style="text-align: left; width: 25%;">Name</th> <th style="text-align: left; width: 30%;">Street or P.O. Address</th> <th style="text-align: left; width: 15%;">City</th> <th style="text-align: left; width: 10%;">State</th> <th style="text-align: left; width: 10%;">Zip</th> </tr> </thead> <tbody> <tr> <td>Officer</td> <td>Fred N. Carlson</td> <td>6965 N 5th W</td> <td>Idaho Falls</td> <td>ID</td> <td>83401</td> </tr> <tr> <td>Officer</td> <td>Christine W. Carlson</td> <td>6965 N 5th W</td> <td>Idaho Falls</td> <td>ID</td> <td>83401</td> </tr> <tr> <td>Officer</td> <td>David Lundrum</td> <td>PO 955 Idaho City ID 83631</td> <td>Idaho City</td> <td>ID</td> <td>83631</td> </tr> </tbody> </table>			Office held	Name	Street or P.O. Address	City	State	Zip	Officer	Fred N. Carlson	6965 N 5 th W	Idaho Falls	ID	83401	Officer	Christine W. Carlson	6965 N 5 th W	Idaho Falls	ID	83401	Officer	David Lundrum	PO 955 Idaho City ID 83631	Idaho City	ID	83631
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5. Organized Under the Laws of: IDAHO C 144159	6. Signature  Date <u>5/15/05</u> Name (Type or Print) <u>Fred Carlson</u> Title <u>Officer</u>																									