

May 11 05 08:28a

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P.1

May 09 05 09:02a

Tony Villelli

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P.3

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May 09 05 06:51a

Joanne S. Rocks Attorney

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P.3

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STATEMENT OF PARTNERSHIP AUTHORITY

(Instructions on back of application)

SECRETARY OF STATE
STATE OF IDAHO

The undersigned partnership hereby files a statement of partnership authority, and submits the following information to the Secretary of State pursuant to Idaho Code § 53-3-303

1. The name of the partnership is: CABIN CRUSADE PARTNERSHIP

2. The street address of its chief executive office is: 151 Clubhouse Way, Sandpoint
Bonner County, ID 83864

3. The street address of one (1) office in Idaho: 151 Clubhouse Way, Sandpoint,
Bonner County, ID 83864

4. The names and mailing addresses of all partners (attached sheets may be added):

Name	Address
See attached	

OR the name and address of the registered agent in Idaho is:

5. The names of the partners authorized to execute an instrument transferring real property held in the name of the partnership:

See attached		

6. Signature of at least 2 partners:

1)	
Typed Name	See attached
2)	
Typed Name	
3)	
Typed Name	

Secretary of State use only

Idaho Secretary of State
Series 01/2001
VMS Form

IDAHO SECRETARY OF STATE
05/11/2005 05:00
OK: 531804 CT: 172099 BH: 809879
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1 @ 20.00 = 20.00 EXPEDITE C # 5

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STATE OF IDAHO

STATEMENT OF PARTNERSHIP AUTHORITY

ATTACHMENT TO ITEM 6.

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ITEM 6. Signature of Partners:

GENERAL PARTNER:

ANTHONY P. VILLELLI

SUSAN L. VILLELLI

GENERAL PARTNER:

MARK B. HURST

CHARLINE TESSMAN HURST

GENERAL PARTNER:

DEREK S. BORTFELD

VALERIE L. CECIL

GENERAL PARTNER:

ANDREW J. PACKER

SHEILA L. PACKER

Date:

Place:

Date:

Place:

Date:

Place:

Date:

Place:

Date:

Place:

Date:

Place:

Date:

Place:

Date:

Place:

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KOOTENAI CO.

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KOOTENAI CO.

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SANDWICH, ID

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SANDWICH, ID

May 11 05 08:30a

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STATE OF IDAHO
STATEMENT OF PARTNERSHIP AUTHORITY
ATTACHMENT TO ITEM 6

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GENERAL PARTNER:

GERALD C. FRANC

JOANNE P. FRANC

Date: _____
Place: _____

Date: _____
Place: _____

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STATE OF IDAHO
STATEMENT OF PARTNERSHIP AUTHORITY
ATTACHMENT TO ITEM 4.

ITEM 4a. List the full names and mailing addresses of all partners.

NAME: ANTHONY P. AND SUSAN L. VILLELLI
ADDRESS: 3019 Point Hayden Dr.
CITY: Hayden Lake STATE: ID ZIP CODE: 83835

NAME: MARK B. HURST AND CHARLINE TESSMAN HURST
ADDRESS: 1523 13th Ave.
CITY: Lewiston STATE: ID ZIP CODE: 83501

NAME: DEREK S. BORTFELD AND VALERIE L. CECIL
ADDRESS: 15300 SE Gladstone St.
CITY: Portland STATE: OR ZIP CODE: 97236

NAME: ANDREW J. PACKER AND SHEILA L. PACKER
ADDRESS: 1717 Janelle Way
CITY: Sandpoint STATE: ID ZIP CODE: 83864

NAME: GERALD C. FRANC AND JOANNE P. FRANC
ADDRESS: 9179 N Prescott
CITY: Hayden STATE: ID ZIP CODE: 83835

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STATE OF IDAHO

STATEMENT OF PARTNERSHIP AUTHORITY

ATTACHMENT TO ITEM 5.

ITEM 5. Name of all partners authorized to execute instruments transferring real property held in the name of the partnership.

PARTNER NAME: ANTHONY P. AND SUSAN L. VILLELLI

PARTNER NAME: MARK B. HURST AND CHARLINE TESSMAN HURST

PARTNER NAME: DEREK S. BORTFELD AND VALERIE L. CECIL

PARTNER NAME: ANDREW J. PACKER AND SHEILA L. PACKER

PARTNER NAME: GERALD C. FRANC AND JOANNE P. FRANC