

No. C 152511		Due no later than Jan 31, 2014 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. APPLECREEK OWNERS ASSOCIATION, INC. LAVAR W KOFOED 1293 W APPLECREEK CT EAGLE ID 83616 USA		LAVAR KOFOED 1293 W APPLECREEK CT EAGLE ID 83616			
						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	TUCKER M JOHNSON	10464 GARVERDALE CT STE 710	BOISE	ID	USA	83704	
DIRECTOR	TIMOTHY WILLIAMS	2229 W STATE ST	BOISE	ID	USA	82702	
DIRECTOR	DAVID JEPSON	1250 W APPLECREEK	EAGLE	ID	USA	83616	
5. Organized Under the Laws of: ID C 152511		6. Annual Report must be signed.* Signature: LaVar Kofoed Name (type or print): LaVar Kofoed					
		Date: 11/20/2013 Title: President					
Processed 11/20/2013 * Electronically provided signatures are accepted as original signatures.							