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|--|-------------|---|----------|---|---------|-------------|--|
| No. C 147836 | | Due no later than Feb 29, 2016 | | 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 | | Annual Report Form 1. Mailing Address: Correct in this box if needed. GEMTONE CENTER NO. 4 USERS ASSOCIATION, INC. MARY LOU DECKER 2593 N. RIDGEBURY WAY MERIDIAN ID 83646 | | MARY LOU DECKER 2593 N. RIDGEBURY WAY MERIDIAN ID 83646 | | | |
| | | | | 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 | LAWNA WEBB | 1180 N OLIVE AVENUE | MERIDIAN | ID | USA | 83642 | |
| DIRECTOR | JAY SIMMONS | 1220 N OLIVE AVENUE | MERIDIAN | ID | USA | 83642 | |
| DIRECTOR | KIRK MOORE | 3115 E. FLORENCE | MERIDIAN | ID | USA | 83642 | |
| 5. Organized Under the Laws of: ID C 147836 | | 6. Annual Report must be signed.* Signature: Lou Decker Name (type or print): Lou Decker Date: 02/25/2016 Title: Registered Agent | | | | | |
| Processed 02/25/2016 | | * Electronically provided signatures are accepted as original signatures. | | | | | |