

|  |                 |   |         |  |         |             |
|--|-----------------|---|---------|--|---------|-------------|
| No. <b>C 170476</b>  |                 | <b>Due no later than Dec 31, 2011</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>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br>BAYVIEW COMMUNITY COUNCIL, INC.<br>LINDA A HACKBARTH<br>PO BOX 112<br>BAYVIEW ID 83803<br>USA |         | SHARON MEYER<br>20572 E CAPE HORN RD<br>BAYVIEW ID 83803 |         |             |
|  |                 |   |         | 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   | SALLY NEWCOMBE  | P.O. BOX 486  | BAYVIEW | ID   | USA     | 83803       |
| DIRECTOR   | MARLYS BLAGDON  | P.O. BOX 257  | BAYVIEW | ID   | USA     | 83803       |
| DIRECTOR   | PAUL STANTON    | P.O. BOX 565  | BAYVIEW | ID   | USA     | 83803       |
| DIRECTOR   | SHERYL PUCKETT  | P.O. BOX 711  | BAYVIEW | ID   | USA     | 83803       |
| TREASURER  | LINDA HACKBARTH | 34274 PEND OREILLE PINES DR.  | BAYVIEW | ID   | USA     | 83803       |
| SECRETARY  | CINDY GARDNER   | P.O. BOX 127  | BAYVIEW | ID   | USA     | 83803       |
| PRESIDENT  | SHARON MEYER    | 20572 E. CAPE HORN RD.  | BAYVIEW | ID   | USA     | 83803       |
| DIRECTOR   | JEAN MOORE      | 17686 E BANNOCK DR  | BAYVIEW | ID   | USA     | 83803       |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>C 170476</b>  |                 | 6. Annual Report must be signed.*<br>Signature: Linda Hackbarth<br>Name (type or print): Linda Hackbarth<br><br>Date: 11/04/2011<br>Title: Treasurer  |         |  |         |             |
| Processed 11/04/2011   |                 | * Electronically provided signatures are accepted as original signatures.   |         |  |         |             |