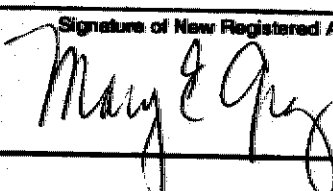
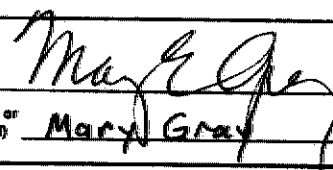


# REINSTATEMENT

|                                                                                                                                                                                                                                                        |                |                                                                                                                                                                                                |                                                                                                                                                                               |                                                                                                                                                                                                      |            |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|
| <b>No.</b> ID 105297<br><b>Return to:</b><br>SECRETARY OF STATE<br>100 WEST JEFFERSON<br>I.O. BOX 83720<br>BOISE, ID 83720-0080<br><b>FEE DUE \$30.00</b><br><b>FORFEITED 12/2/1996</b>                                                                |                | <b>Annual Report Form</b><br><b>1. Mailing Address - Please Correct, If Not Correct</b><br>TRIPLE RIDGE ESTATES SUBDIVISION<br>HOMEOWNERS' ASSOCIATION, INC.<br>PO Box 1313<br>Eagle, ID 83616 |                                                                                                                                                                               | <b>2. Registered Agent and Office NOT A R.O. BOX</b><br>90 NOV 23 AM 8:53<br>4238 N Triple Ridge Pl<br>SECRETARY OF STATE<br>Eagle ID 83616<br><b>3. Organized Under the Laws of:</b><br>ID C 105297 |            |
| <b>4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors</b><br><b>Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one)</b> |                |                                                                                                                                                                                                |                                                                                                                                                                               |                                                                                                                                                                                                      |            |
| <b>Office Held</b>                                                                                                                                                                                                                                     | <b>Name</b>    | <b>Street or P.O. Address</b>                                                                                                                                                                  | <b>City</b>                                                                                                                                                                   | <b>State</b>                                                                                                                                                                                         | <b>Zip</b> |
| President                                                                                                                                                                                                                                              | Mary Gray      | 4238 N Triple Ridge PL                                                                                                                                                                         | Eagle                                                                                                                                                                         | ID                                                                                                                                                                                                   | 83616      |
| Treasurer                                                                                                                                                                                                                                              | Anne Vermilion | 4315 N Sage Hill Ln                                                                                                                                                                            | Eagle                                                                                                                                                                         | ID                                                                                                                                                                                                   | 83616      |
| Secretary                                                                                                                                                                                                                                              | Cathy Botte    | 1650 E Beacon Light Rd                                                                                                                                                                         | Eagle                                                                                                                                                                         | ID                                                                                                                                                                                                   | 83616      |
| <b>5. Signature of New Registered Agent</b><br>x                                                                                                                      |                |                                                                                                                                                                                                | <b>6.</b><br>Signature x  Date x _____<br>Name (Typed or Printed) Mary Gray Title President |                                                                                                                                                                                                      |            |

## INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

- 1.) Please pay special attention to the mailing address. If it is incorrect, please make the appropriate corrections.  
NOTE: The name of the business entity cannot be altered on the annual report form.
- 2.) If the registered agent has changed or moved, please make that correction on this form. The registered agent must be found IN IDAHO at a PHYSICAL ADDRESS. PO Boxes WILL NOT be accepted. If report is for a Limited Liability please refer to #4 below.
- 3.) Corporation: Enter names and addresses of ONLY the president, secretary, and directors in block 4.  
Limited Liability Company: Enter the names and addresses of the managers or members in block 4.  
NOTE: Putting "same as last year" WILL NOT be accepted.
- 4.) Limited Liability Company: If the registered agent has been changed in block 2, then the NEW registered agent must accept that position by signing in block 5.
- 5.) Corporation: Block 6 must be signed by an officer or chairman of the board of the corporation. Signer must specify his or her title.  
Limited Liability Company: Block 6 must be signed by a manager or member, who must specify his or her title.
- 6.) If new registered Agent, please sign block 5.