No. C 164478		D	ue no later than Jan 31, 2016	2. Registered Age	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			SHERRY J LENARZ			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. RIVERFRONT HOUSE CONDOMINIUM OWNER'S ASSOCIATION, INC. SAMM HAIGHT C/O ASSOCIATION SERVICES INC 1250 IRONWOOD DR STE 226		COEUR D'ALENI	1250 IRONWOOD DR STE 226 COEUR D'ALENE ID 83814 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		COEUR D ALENE ID 83814		3. <u>New</u> Registered				
4. Corporations: Enter Na	mes and Busin	ess Addresses o	f President, Secretary, and Directors. Treasu	rer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR	ROBERT NEV	WELL	1950 W BELLERIVE LN #109	COEUR D'ALENE	ID	USA	83814	
VICE PRESIDENT	JOE MCKINN	ION	1250 IRONWOOD DR #226	COEUR D'ALENE	ID	USA	83814	
PRESIDENT	JOHN MAHER		1250 IRONWOOD DR. #226	COEUR D ALENE	ID	USA	83814	
DIRECTOR DALE NOSW		ORTHY	1250 IRONWOOD DR #226	COEUR D'ALENE	ID	USA	83814	
DIRECTOR WAYNE GIAI		NOTTI	1250 IRONWOOD DR #226	COEUR D ALENE	ID	USA	83814	
DIRECTOR	CLIFF MORT		1250 IRONWOOD DR. #226	COEUR D'ALENE	ID	USA	83814	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Samm Haight		Date: 11	Date: 11/18/2015			
C 164478		Name (type or print): Samm Haight		Title: Account Manager				
Processed 11/18/2015	* Electronically provided signatures are accepted as original signatures.							