



No. C 133099	Reinstatement Annual Report Form ADMIN DISSOLVED 06/17/2014		2. Registered Agent and Office (NOT A P.O. BOX) MONTY MERICLE 4400 MERIWETHER BOISE ID 83705																					
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. COMMON AREA OWNERS ASSOCIATION, INC. MONTY L MERICLE 4400 MERIWETHER BOISE ID 83705 USA		3. New Registered Agent Signature. 																					
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres. <table border="1"> <thead> <tr> <th>Office Held</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>President</td> <td>MONTY MERICLE</td> <td>4400 MERIWETHER</td> <td>BOISE</td> <td>IA</td> <td>US</td> <td>83705</td> </tr> <tr> <td>TREASURER</td> <td>DALIZ HETHERINGTON</td> <td>929 WEST MOUNTAIN</td> <td>CASCADE</td> <td>IA</td> <td>US</td> <td>83611</td> </tr> </tbody> </table>				Office Held	Name	Street or PO Address	City	State	Country	Postal Code	President	MONTY MERICLE	4400 MERIWETHER	BOISE	IA	US	83705	TREASURER	DALIZ HETHERINGTON	929 WEST MOUNTAIN	CASCADE	IA	US	83611
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5. Organized Under the Laws of: IDAHO C 133099		6. Signature:  Name (type or print): <u>MONTY MERICLE</u> Date: <u>6-24-2014</u> Title: <u>PRESIDENT</u>																						

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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM