No. C 180000 Return to:		Due no later than Sep 30, 2014 Annual Report Form	Annual Report Form KARA BESST			PO BOX)
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. GRITMAN MEDICAL PARK CONDOMINIUM ASSOCIATION 1, INC KARA L BESST	700 S MAIN ST MOSCOW ID 83843 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		700 S MAIN ST MOSCOW ID 83843 USA	3. <u>Ivew</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
PRESIDENT VICE PRESIDENT	KARA L BES BJ SWANSON		MOSCOW MOSCOW	ID ID	USA USA	83843 83843
5. Organized Under the Laws of:		6. Annual Report must be signed.*				
ID		Signature: Kara Besst	Date: 09/26/2014			
C 180000		Name (type or print): Kara Besst	Title: President			
Processed 09/26/2014 * Electronically provided signatures are accepted as original signatures.						