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|--------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|-------------------------------------------------------------|---------|------------------|--|
| No. <b>C 159319</b>                                                                                                                                    |                     | <b>Due no later than Mar 31, 2008</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>                                                                                                                                                                                 |          | SCOTT A ROBINETT<br>26852 FREEZEOUT RD<br>CALDWELL ID 83607 |         |                  |  |
|                                                                                                                                                        |                     | <b>1. Mailing Address: Correct in this box if needed.</b><br>HARTLEY ESTATES PROPERTY OWNER ASSOCIATION, INC.,<br>A NON-PROFIT CORPORATION<br>SCOTT A ROBINETT<br>26852 FREEZEOUT RD<br>CALDWELL ID 83607 |          | 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                                                                                                                                               | TOM BICANDI         | 14191 GOODSON RD.                                                                                                                                                                                         | CALDWELL | ID                                                          | USA     | 83607            |  |
| SECRETARY                                                                                                                                              | THOMAS E. MORTENSEN | 14405 GOODSON RD.                                                                                                                                                                                         | CALDWELL | ID                                                          | USA     | 83607            |  |
| 5. Organized Under the Laws of:                                                                                                                        |                     | 6. Annual Report must be signed.*                                                                                                                                                                         |          |                                                             |         |                  |  |
| <b>ID<br/>C 159319</b>                                                                                                                                 |                     | Signature: Scott A. Robinett                                                                                                                                                                              |          |                                                             |         | Date: 04/15/2008 |  |
|                                                                                                                                                        |                     | Name (type or print): Scott A. Robinett                                                                                                                                                                   |          |                                                             |         | Title: President |  |
| Processed 04/15/2008                                                                                                                                   |                     | * Electronically provided signatures are accepted as original signatures.                                                                                                                                 |          |                                                             |         |                  |  |