

|                                                                                                                                                        |              |                                                                                                             |       |                                                    |                  |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-------------------------------------------------------------------------------------------------------------|-------|----------------------------------------------------|------------------|-------------|--|
| No. <b>C 56683</b>                                                                                                                                     |              | <b>Due no later than Oct 31, 2010</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>                                                                                   |       | KARA BURNS<br>1880 TUESDAY LN<br>BOISE ID 83705    |                  |             |  |
|                                                                                                                                                        |              | <b>1. Mailing Address: Correct in this box if needed.</b>                                                   |       | 3. <u>New</u> Registered Agent Signature:*         |                  |             |  |
|                                                                                                                                                        |              | INDEPENDENCE CONDOMINIUM HOMEOWNERS<br>ASSOCIATION, INC.<br>KARA BURNS<br>1880 TUESDAY LN<br>BOISE ID 83705 |       |                                                    |                  |             |  |
| 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 |  |
| SECRETARY                                                                                                                                              | NANCY HYLTON | 1861 TUESDAY LN                                                                                             | BOISE | ID                                                 | USA              | 83705       |  |
| PRESIDENT                                                                                                                                              | MONTE TUCKER | 1884 TUESDAY LN                                                                                             | BOISE | ID                                                 | USA              | 83705       |  |
| 5. Organized Under the Laws of:                                                                                                                        |              | 6. Annual Report must be signed.*                                                                           |       |                                                    |                  |             |  |
| <b>ID<br/>C 56683</b>                                                                                                                                  |              | Signature: Kara Burns                                                                                       |       |                                                    | Date: 10/10/2010 |             |  |
|                                                                                                                                                        |              | Name (type or print): Kara Burns                                                                            |       |                                                    | Title: Treasurer |             |  |
| Processed 10/10/2010                                                                                                                                   |              | * Electronically provided signatures are accepted as original signatures.                                   |       |                                                    |                  |             |  |