

Confirmation Please

No. C 152841		Due no later than Jan 31, 2014 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) <del>SANDRA R. BUFFINGTON</del> 2107 PINYON PEAK DR EMMETT ID 83617 CAROL HERSMAN 2409 PINYON PEAK DRIVE EMMETT, ID 83617	
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. CRYSTAL CREEK ESTATES HOMEOWNER'S ASSOCIATION, INC. PO BOX 756 EMMETT ID 83617 USA		3. New Registered Agent Signature. ★ Carol Hersman	
NO FILING FEE IF RECEIVED BY DUE DATE					
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres.					
Office Held	Name	Street or PO Address	City	State	Country Postal Code
PRESIDENT	DONALD MACKAY	2112 Feltham Peak Drive,	Emmett	ID	83617
VICE-PRESIDENT	CAROL HERSMAN	2409 Pinyon Peak Drive,	Emmett	ID	83617
TREASURER	LYNDA DIAS	2107 Pinyon Peak Drive,	Emmett	ID	83617
SECRETARY	DIANE HANKS	2109 Feltham Peak Drive,	Emmett	ID	83617
5. Organized Under the Laws of:		6. ★			
IDAHO C 152841		Signature:		Date:	
		Name (type or print):		Title:	
		CAROL HERSMAN		Vice-President	
Issued 11/22/2013 by SLD				124523	

## INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

**Block 1:** Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the corrected address **must** be inside Block 1.

**Block 2:** To change the registered agent or office, strike the incorrect information and write in the correct information. **Note:** The office of the registered agent must be at a street address in Idaho, **not a Post Office Box or Personal Mail Box.**

**Block 3:** Only a **new** registered agent must sign in Block 3.

**Block 4:** Enter names and business addresses of president, secretary, and directors. **Note:** **DO NOT** put "same as last year" or "same as above". **These will not be accepted. Changes here will not affect the address in Block 1.** If more space is needed please add an attachment.

**Block 5:** May not be altered through the use of this form.

**Block 6:** The annual report must be signed by a person authorized to represent the corporation. Print or type the name of the signer below the signature.

**\*\* The image of this form will be available on the internet once it has been filed. DO NOT enter Social Security numbers.**

If the corporation is no longer doing business in Idaho, you may file the appropriate form. Forms are available on the website at [www.sos.idaho.gov](http://www.sos.idaho.gov). However, if no timely annual report is filed, administrative action will be taken, at no cost to the corporation to terminate the legal existence. If you have any questions contact the Commercial Division at (208) 334-2301.

If the document is incorrect, is there a telephone number to reach you for corrections? \_\_\_\_\_

POSTMARK DATES WILL NOT BE ACCEPTED