

No. C 179629		Due no later than Aug 31, 2009 Annual Report Form		2. Registered Agent and Address (NO PO BOX)				
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. NORTH WOODS ASSOCIATION, INC. (THE) KARL H. LEWIES PO BOX 448 ST ANTHONY ID 83445		KARL H. LEWIES 615 E 4TH N ST ANTHONY ID 83445				
						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	KARL H. LEWIES	PO BOX 448	ST ANTHONY	ID	USA	83445		
DIRECTOR	JUDITH G LEWIES	PO BOX 448	ST ANTHONY	ID	USA	83445		
DIRECTOR	PATRICIA SMITH	441 S 1ST E	ST ANTHONY	ID	USA	83445		
5. Organized Under the Laws of: ID C 179629		6. Annual Report must be signed.* Signature: Karl H. Lewies Name (type or print): Karl H. Lewies						Date: 06/15/2009 Title: Director
Processed 06/15/2009 * Electronically provided signatures are accepted as original signatures.								