| No. <b>C 130564</b>  | Due no later than Sep 30, 2014  | 2. Registered Agent and Address (NO PO BOX)  RANDY L HAZEN 1356 JULIE LANE TWIN FALLS ID 83301 |       |         |             |
|--|---|--|-------|---------|-------------|
| Return to:   | Annual Report Form  |  |       |         |             |
| SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080 | 1. Mailing Address: Correct in this box if needed.  CHANTRELLE SUBDIVISION OWNERS ASSOCIATION, INC. RANDY L HAZEN 1356 JULIE LANE |  |       |         |             |
|  | TWIN FALLS ID 83301   | 3. <u>New</u> Registered Agent Signature:*   |       |         |             |
| NO FILING FEE IF<br>RECEIVED BY DUE DATE   |   |  |       |         |             |
| 4. Corporations: Enter Names and Bus   | ness Addresses of President, Secretary, and Directors. Treasurer  | (optional).  |       |         |             |
| Office Held Name   | Street or PO Address  | City   | State | Country | Postal Code |
| TREASURER TERRY PEI  | RRON 389 SOUTH 650 EAST   | DIETRICH   | ID    | USA     | 83324       |
| PRESIDENT RANDY L  | HAZEN 1356 JULIE LN.  | TWIN FALLS   | ID    | USA     | 83301       |
|  |   |  |       |         |             |
| 5. Organized Under the Laws of:  | 6. Annual Report must be signed.*   |  |       |         |             |
| ID   | Signature: Randy L. Hazen   | Date: 08/25/2014   |       |         |             |
| C 130564   | Name (type or print): Randy L. Hazen  | Title: President   |       |         |             |
| Processed 08/25/2014   | * Electronically provided signatures are accepted as original signatures.   |  |       |         |             |