

No. C 139926	Due no later than Jul 31, 2013 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. LAKELAND ESTATES HOMEOWNER'S ASSOCIATION, INC. BETH ELLEN PUNCHES PO BOX 1255 EAGLE ID 83616	HOMEOWNERS ASSOCIATIONS PROPERTY MANAGEMENT COMPANY 1465 NORTH ELLINGTON PLACE EAGLE ID 83616				
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).		3. <u>New</u> Registered Agent Signature:*				
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
DIRECTOR	JON MORRIS	PO BOX 1255	EAGLE	ID	USA	83616
DIRECTOR	BOB WARD	PO BOX 1255	EAGLE	ID	USA	83616
DIRECTOR	ZACK DEBOI	PO BOX 1255	EAGLE	ID	USA	83616
5. Organized Under the Laws of: ID C 139926	6. Annual Report must be signed.*					
		Signature: Beth Ellen Punches	Date: 05/25/2013			
		Name (type or print): Beth Ellen Punches	Title: Association Manager			
Processed 05/25/2013		* Electronically provided signatures are accepted as original signatures.				