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|--|-----------------|---|-------|---|---------|-------------|
| No. C 121552 | | Due no later than Nov 31, 2005 | | 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. SOUTHPOINT HOMEOWNERS ASSOCIATION, INC. PO BOX 5714 BOISE ID 83705 0000 | | ASSOCIATION MANAGEMENT INC 1521 E BOISE AVE BOISE ID 83706 0000 | | |
| | | | | 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 | TODD EGGERS | 1953 W. WHISPER COVE PL. | BOISE | ID | USA | 83709 |
| DIRECTOR | KEITH PIERCE | 2169 S. TOLLGATE PL. | BOISE | ID | USA | 83709 |
| DIRECTOR | MARK HESSING | 11314 W. SOUTHERLAND COURT | BOISE | ID | USA | 83709 |
| DIRECTOR | MIKE DANIELSON | 11280 W. DIVIDE PASS DR. | BOISE | ID | USA | 83709 |
| DIRECTOR | ERNIE CALLENDER | 5010 CHINOOK AVE. | BOISE | ID | USA | 83709 |
| 5. Organized Under the Laws of: IDAHO C 121552 | | 6. Annual Report must be signed.* Signature: Katie Miller Name (type or print): Katie Miller Date: 09/12/2005 Title: AMI Opr. Sprv. | | | | |
| Processed 09/12/2005 | | * Electronically provided signatures are accepted as original signatures. | | | | |