

October 11, 1996

JANEY MCANULTY
GREATER TWIN FALLS ASSOC C 27911
1525 ADDISON AVE E #104
TWIN FALLS ID 83301

RE: GREATER TWIN FALLS ASSOC C 27911

Greetings:

Please find enclosed your recently submitted annual report for the 1996-1997 fiscal year. We are unable to accept it in its present form. Please make the following correction(s) and return to this office.

The annual report must be signed by an authorized individual designated by the Board of the corporation.

If you have any questions or need further assistance, please do not hesitate to contact this office at (208) 332-2811.

Very truly yours,



Sheryl DeVries
Corporate Division

Enclosures: cited

No. C 27911	Annual Report Form <i>Due No Later Than November 30,</i> 1995		2. Registered Agent and Office NOT A P.O. BOX JANEY MCANULTY 1525 ADDISON AVE. E. #104 TWIN FALLS ID 83301
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED * FIRST NOTICE *	1. Mailing Address - Please Correct, If Not Correct GREATER TWIN FALLS ASSOCIATE JANEY MCANULTY 1525 ADDISON AVE. E. #104 TWIN FALLS ID 83301		3. Organized Under the Laws of: ID C 27911
4. Corporations: Enter Names and Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one)			
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u> <u>State</u> <u>Zip</u>
President	Carlynn Noh	Box 223	Twin Falls, ID 83303-0223
President-Elect	Willis Stone	Box 223	Twin Falls, ID 83303-0223
Directors:	Debbie Daniels	1286 Addison E	Twin Falls, ID 83301
	Peggy Connally	Box 174	Twin Falls, ID 83303-0174
	Lynn Rasmussen	Box 174	Twin Falls, ID 83303-0174
	Judy Hoffman	Box 549	Buhl, ID 83316
	Olivia Rowe	862 Blue Lakes N	Twin Falls, ID 83301
Secretary	Janey McAnulty	1525 Addison E	Twin Falls, ID 83301
5. NATURE OF BUSINESS REAL ESTATE		6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. Signature _____ Date _____ Name (Typed or Printed) _____ Title _____	

ISSUED: 07-06-1995

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