

No. C 182382		Due no later than Mar 31, 2012 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. RIVERVIEW MEDICAL PLAZA CONDOMINIUM OWNERS ASSOCIATION, INC. ANGIE ROTHROCK 185 W. 4TH AVE, STE A POST FALLS ID 83854 USA		LAWRENCE K GIBBON MD 185 W. 4TH AVE, STE B POST FALLS ID 83854			
						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	JOHN J HEMMINGSON	1859 N. LAKEWOOD DR. STE 301	COEUR D'ALENE	ID	USA	83814	
DIRECTOR	LAWRENCE K GIBBON	185 W. 4TH AVE STE B	POST FALLS	ID	USA	83854	
DIRECTOR	CHER A JACOBSEN	185 W. 4TH AVE STE B	POST FALLS	ID	USA	83854	
5. Organized Under the Laws of: ID C 182382		6. Annual Report must be signed.* Signature: Angie Rothrock Name (type or print): Angie Rothrock					
		Date: 01/11/2012 Title: Controller					
Processed 01/11/2012 * Electronically provided signatures are accepted as original signatures.							