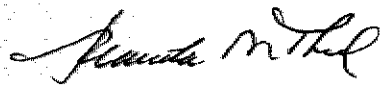
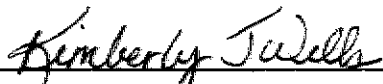


No. 0105573	Annual Report Form 1995 Due No Later Than November 30,	2. Registered Agent and Office NOT A P.O. BOX
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED * FIRST NOTICE *	1. Mailing Address - Please Correct, If Not Correct COLUMBIA VILLAGE NO. 15 HOME PO BOX 5714 BOISE ID 83705	ASSOCIATION MANAGEMENT 1521 E BOISE AVE BOISE ID 83706 3. Organized Under the Laws of: ID C105573

4. Corporations: Enter Names and Business Addresses of **President, Secretary and Directors**
 Limited Liability Companies: Enter Names and Addresses of ☐ **Managers** or ☐ **Members** (check one)

Office held	Name	Street or P.O. Address	City	State	Zip
Pres.	Eldon Anderson	5543 Adonis Pl.	Boise	ID	83716
Vice Pres.	William Erickson	5794 Caper Pl.	Boise	ID	83716
Sec.	Kimberly Wells	5615 Adonis Pl.	Boise	ID	83716

5. Signature of New Registered Agent 	6. Signature  Date <u>8/30/98</u> Name (Typed or Printed) <u>Kimberly Wells</u> Title <u>Secretary</u>
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ISSUED: 07-05-1998

DO NOT TAPE OR STAPLE

21954