

|  |                 |   |        |  |         |  |  |
|--|-----------------|---|--------|--|---------|--|--|
| No. <b>C 68165</b>   |                 | <b>Due no later than Oct 31, 2012</b><br><b>Annual Report Form</b>  |        | 2. Registered Agent and Address ( <b>NO PO BOX</b> )             |         |  |  |
| Return to:<br><br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                 | <b>1. Mailing Address: Correct in this box if needed.</b><br><br>MEMALOOSE ONE ASSOCIATION, INC.<br>LARRY J ROBERTS<br>5205 S WOODFIELD LN<br>SPOKANE WA 99223<br>USA |        | JEANETTE CHARBONEAU<br>271 KULLYSPELL DR UNIT 5<br>HOPE ID 83836 |         |  |  |
|  |                 |   |        |  |         | 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                                |  |
| PRESIDENT  | BARBARA FOLLETT | 2623 N HIGHLAND ST.   | TACOMA | WA   | USA     | 98407                                      |  |
| 5. Organized Under the Laws of:<br><br><b>ID</b><br><b>C 68165</b>   |                 | 6. Annual Report must be signed.*<br><br>Signature: Larry Roberts<br>Name (type or print): Larry Roberts<br><br>Date: 09/10/2012<br>Title: Secretary-Treasurer        |        |  |         |  |  |
| Processed 09/10/2012      * Electronically provided signatures are accepted as original signatures.  |                 |   |        |  |         |  |  |