

No. C 106222	Due no later than May 31, 2002 Annual Report Form	2. Registered Agent and Office NO PO BOX JAMES E LANSBERRY 819 EASTLAND PARK DR TWIN FALLS, ID 83301																		
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 applicable EASTLAND PARK HOMEOWNERS ASSOCIATIO JAMES E LANSBERRY 819 EASTLAND PARK DR TWIN FALLS, ID 83301	3. <u>New</u> Registered Agent Signature																		
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px solid black;"><u>Office held</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>Name</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>Street or P.O. Address</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>City</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>State</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td style="vertical-align: top;"><i>President/</i></td> <td style="vertical-align: top;"><i>James E. Lansberry</i></td> <td style="vertical-align: top;"><i>819 Eastland PK DR</i></td> <td style="vertical-align: top;"><i>Twin Falls,</i></td> <td style="vertical-align: top;"><i>ID</i></td> <td style="vertical-align: top;"><i>83301</i></td> </tr> <tr> <td style="vertical-align: top;"><i>Director</i></td> <td style="vertical-align: top;"><i>DORIS F. Lansberry</i></td> <td style="vertical-align: top;"><i>819 Eastland PK DR</i></td> <td style="vertical-align: top;"><i>Twin Falls,</i></td> <td style="vertical-align: top;"><i>ID</i></td> <td style="vertical-align: top;"><i>83301</i></td> </tr> </tbody> </table>			<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	<i>President/</i>	<i>James E. Lansberry</i>	<i>819 Eastland PK DR</i>	<i>Twin Falls,</i>	<i>ID</i>	<i>83301</i>	<i>Director</i>	<i>DORIS F. Lansberry</i>	<i>819 Eastland PK DR</i>	<i>Twin Falls,</i>	<i>ID</i>	<i>83301</i>
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5. Organized Under the Laws of: <div style="text-align: center;"> IDAHO C 106222 </div>	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: bottom;"> Signature <i>James E. Lansberry</i> Name (Typed or Printed) <i>James E. Lansberry</i> </td> <td style="width: 50%; vertical-align: bottom;"> Date <i>4/29/02</i> Title <i>Pres/Director</i> </td> </tr> </table>		Signature <i>James E. Lansberry</i> Name (Typed or Printed) <i>James E. Lansberry</i>	Date <i>4/29/02</i> Title <i>Pres/Director</i>																
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