

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                      |                                                                                                                                           |              |                    |             |                               |             |              |            |                                                    |  |  |  |  |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------|--------------|--------------------|-------------|-------------------------------|-------------|--------------|------------|----------------------------------------------------|--|--|--|--|--|
| No. C 21191                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <b>Annual Report Form</b> 1995<br>Due No Later Than November 30,                                                                                                                                                                                         |                                                                                                                                                                                                                                                      | 2. Registered Agent and Office <b>NOT A P.O. BOX</b>                                                                                      |              |                    |             |                               |             |              |            |                                                    |  |  |  |  |  |
| Return to:<br><b>SECRETARY OF STATE</b><br><b>700 WEST JEFFERSON</b><br><b>PO BOX 83720</b><br><b>BOISE, ID 83720-0080</b><br><br><b>NO FEE REQUIRED</b><br><br><b>* FIRST NOTICE *</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 1. Mailing Address - Please Correct, If Not Correct<br><br><del>LIZARD BUTTE EASTER SUNRISE</del><br><del>INDA VOYES</del> <b>Connie Hill</b><br><del>BOX 120</del> <b>PO BOX 97</b><br><b>Huston ID 83630</b><br><br><del>MANSING</del> <b>ID 83632</b> |                                                                                                                                                                                                                                                      | <b>CONNIE HILL</b><br><b>16031 PRIDE LN</b><br><br><b>HUSTON ID 83630</b><br><br>3. Organized Under the Laws of:<br><br><b>ID C 21191</b> |              |                    |             |                               |             |              |            |                                                    |  |  |  |  |  |
| 4. Corporations: Enter Names and Addresses of <b>President, Secretary and Directors</b><br>Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> <b>Managers</b> or <input type="checkbox"/> <b>Members</b> (check one)<br><br><table border="0" style="width:100%"> <tr> <td style="text-align:center"><u>Office held</u></td> <td style="text-align:center"><u>Name</u></td> <td style="text-align:center"><u>Street or P.O. Address</u></td> <td style="text-align:center"><u>City</u></td> <td style="text-align:center"><u>State</u></td> <td style="text-align:center"><u>Zip</u></td> </tr> <tr> <td colspan="6" style="text-align:center; height: 150px; vertical-align: middle;"> <p style="font-size: 2em;">See Attached Paper!</p> </td> </tr> </table> |                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                      |                                                                                                                                           |              | <u>Office held</u> | <u>Name</u> | <u>Street or P.O. Address</u> | <u>City</u> | <u>State</u> | <u>Zip</u> | <p style="font-size: 2em;">See Attached Paper!</p> |  |  |  |  |  |
| <u>Office held</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <u>Name</u>                                                                                                                                                                                                                                              | <u>Street or P.O. Address</u>                                                                                                                                                                                                                        | <u>City</u>                                                                                                                               | <u>State</u> | <u>Zip</u>         |             |                               |             |              |            |                                                    |  |  |  |  |  |
| <p style="font-size: 2em;">See Attached Paper!</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                      |                                                                                                                                           |              |                    |             |                               |             |              |            |                                                    |  |  |  |  |  |
| 5. <b>NATURE OF BUSINESS</b><br><br><b>RELIGIOUS ORGANIZATION</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                          | 6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.<br>Signature <u>Connie Hill</u> Date <u>9-25-96</u><br>Name (Typed or Printed) <u>Connie Hill</u> Title <u>Secretary</u> |                                                                                                                                           |              |                    |             |                               |             |              |            |                                                    |  |  |  |  |  |

ISSUED: 07-06-1993

14304

LIZARD BUTTE EASTER SUNRISE ASSOCIATION

BOARD OF DIRECTORS - TERMS EXPIRE 1997

|                |          |                      |           |    |       |
|----------------|----------|----------------------|-----------|----|-------|
| Nettie Hansen  | 465-3696 | 1207 Syringa         | Nampa     | Id | 83686 |
| Fred Hill      | 454-9001 | P O Box 97           | Huston    | Id | 83630 |
| George Johnson | 459-2701 | 16494 Marsing Rd     | Caldwell  | Id | 83605 |
| Sue Kekel      | 585-2912 | P O Box 670          | Middleton | Id | 83644 |
| Becki Kekel    | 585-2912 | P O Box 670          | Middleton | Id | 83644 |
| Chuck Kiester  | 459-3887 | 12853 Chicken Dinner | Caldwell  | Id | 83605 |
| Ruth Maendl    | 896-4335 | Rt 1 Box 860         | Marsing   | Id | 83639 |
| Helen Nelson   | 459-2142 | 3411 Starlight       | Caldwell  | Id | 83605 |
| Carl Seale     | 466-6199 | 913 10th Ave N       | Nampa     | Id | 83687 |
| Rose Seale     | 466-6199 | 913 10th Ave N       | Nampa     | Id | 83687 |

BOARD OF DIRECTORS - TERMS EXPIRE 1998

|                   |          |                  |          |    |       |
|-------------------|----------|------------------|----------|----|-------|
| Mark Allen        | 455-2440 | P O Box 947      | Nampa    | Id | 83652 |
| Charlotte Johnson | 459-2701 | 15494 Marsing Rd | Caldwell | Id | 83605 |
| Golden Millet     | 896-4049 | Rt. 1            | Marsing  | Id | 83639 |
| Allen Nelson      | 459-2143 | 3411 Starlight   | Caldwell | Id | 83605 |
| Linda Noyce       | 896-4857 | P O Box 126      | Marsing  | Id | 83639 |
| Kelli Rose        | 896-4639 | Rt. 1            | Marsing  | Id | 83639 |
| Craig White       | 896-4184 | P O Box 55       | Marsing  | Id | 83639 |
| Jill Winschell    | 887-7865 | 471 W Woodbury   | Meridian | Id | 83642 |

OFFICERS FOR 1996-1997

|                |                |
|----------------|----------------|
| President      | Fred Hill      |
| Vice President | Nettie Hansen  |
| Sec-Treas      | Connie Hill    |
| Publicity      | Jill Winschell |
| Scrapbook      | Helen Nelson   |

Connie Hill  
Secretary 9-25-96