

No. C 161751	Reinstatement Annual Report Form ADMIN DISSOLVED 10/15/2014		2. Registered Agent and Office (NOT A P.O. BOX)	
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed. BRECKENRIDGE ESTATES SUBDIVISION NO. 3 HOMEOWNERS ASSOCIATION, INC. TERRY L REINKE <i>GRANT E. STARKEY</i> 694 CANYON PARK AVE TWIN FALLS ID 83303 USA		J EVAN ROBERTSON 134 3RD AVE E TWIN FALLS ID 83303	
REINSTATEMENT FEE DUE: \$30.00			3. New Registered Agent Signature.	
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres.				
Office Held	Name	Street or PO Address	City	State Country Postal Code
President	<i>GRANT E. STARKEY</i>	694 Canyon Park Ave	TWIN FALLS	ID 83301
Secretary	<i>William Sweet</i>	Canyon Park Ave	Twin Falls	ID 83301
5. Organized Under the Laws of:	6.			
IDAHO C 161751	Signature:	<i>Grant E. Starkey</i>	Date:	<u>5/18/2015</u>
	Name (type or print):	<i>GRANT E. STARKEY</i>	Title:	<u>PRES.</u>

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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM