

No. C 191158		Due no later than May 31, 2015		2. Registered Agent and Address (NO PO BOX)			
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 needed. SLEEP'S CABINS CONDOMINIUM OWNERS ASSOCIATION, INC. TAWNIE L SLEEP 231 LAKESHORE DR SAGLE ID 83860		TAWNIE L SLEEP 231 LAKESHORE DR SAGLE ID 83860			
				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	
DIRECTOR	KIA NIKOL COOK	3915 E 16TH AVE	SPOKANE	WA	USA	99223	
DIRECTOR	BRANDON L SLEEP	231 LAKESHORE DR	SAGLE	ID	USA	83860	
5. Organized Under the Laws of: ID C 191158		6. Annual Report must be signed.* Signature: Tawnie Sleep Name (type or print): Tawnie Sleep Date: 04/30/2015 Title: Agent					
Processed 04/30/2015		* Electronically provided signatures are accepted as original signatures.					