

|                                                                                                                                                        |                |                                                                                                                                                                     |  |                                                               |       |                  |             |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------|-------|------------------|-------------|
| No. <b>C 176299</b>                                                                                                                                    |                | <b>Due no later than Dec 31, 2016</b>                                                                                                                               |  | 2. Registered Agent and Address <b>(NO PO BOX)</b>            |       |                  |             |
| Return to:<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>SHAW MOUNTAIN CONDO ASSOCIATION, INC.<br>ARTHUR J BERRY<br>250 W BOBWHITE CT STE 230<br>BOISE ID 83706 |  | ARTHUR J BERRY<br>250 W BOBWHITE CT STE 230<br>BOISE ID 83706 |       |                  |             |
|                                                                                                                                                        |                |                                                                                                                                                                     |  | 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                                                                                                                                               | ARTHUR J BERRY | 250 W BOBWHITE CT SUITE 230                                                                                                                                         |  | BOISE                                                         | ID    | USA              | 83706       |
| DIRECTOR                                                                                                                                               | SUSAN BERRY    | 250 W BOBWHITE CT SUITE 230                                                                                                                                         |  | BOISE                                                         | ID    | USA              | 83706       |
| 5. Organized Under the Laws of:                                                                                                                        |                | 6. Annual Report must be signed.*                                                                                                                                   |  |                                                               |       |                  |             |
| <b>ID<br/>C 176299</b>                                                                                                                                 |                | Signature: Arthur Berry                                                                                                                                             |  |                                                               |       | Date: 10/26/2016 |             |
|                                                                                                                                                        |                | Name (type or print): Arthur Berry                                                                                                                                  |  |                                                               |       | Title: Director  |             |
| Processed 10/26/2016                                                                                                                                   |                | * Electronically provided signatures are accepted as original signatures.                                                                                           |  |                                                               |       |                  |             |