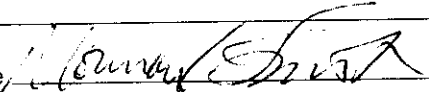
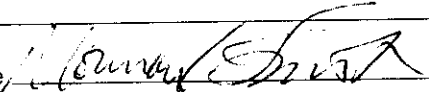
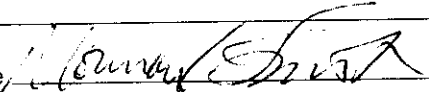


<b>No. C 86301</b>	<b>Due no later than Mar 31, 2003</b> <b>Annual Report Form</b>	2. Registered Agent and Office <b>NO PO BOX</b>  NORMAN K SMITH 1056 E 65 N  IDAHO FALLS, ID 83401
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	1. Mailing Address - Correct in this box, if applicable  FOUR PEAKS ESTATES II HOMEOWNERS AS  PO BOX 876  DRIGGS, ID 83422	3. <u>New</u> Registered Agent Signature

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.
 

Office held	Name	Street or P.O. Address	City	State	Zip
AUTHORIZED DIRECTOR	NORMAN K SMITH	PO Box 876	DRIGGS	ID	83422
SEC	SHANNA SUMMERS	PO Box 876	DRIGGS	ID	83422
TREASUR	ANN WALSH	PO Box 876	DRIGGS	ID	83422

5. Organized Under the Laws of:  IDAHO C 86301	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">           Signature  </td> <td style="width: 50%;">           Date <u>March 30, 2003</u> </td> </tr> <tr> <td>           Name (Typed or Printed) <u>Norman K Smith</u> </td> <td>           Title <u>AUTHORIZED DIRECTOR</u> </td> </tr> </table>	Signature 	Date <u>March 30, 2003</u>	Name (Typed or Printed) <u>Norman K Smith</u>	Title <u>AUTHORIZED DIRECTOR</u>
Signature 	Date <u>March 30, 2003</u>				
Name (Typed or Printed) <u>Norman K Smith</u>	Title <u>AUTHORIZED DIRECTOR</u>				