

No. 046003	Idaho Corporation Annual Report Form Due No Later Than November 1, 1987	2. Registered Agent and Office																									
Return To Secretary of State Room 203, Statehouse Boise, ID 83724	1. Mailing Address — Please Correct 046003 204 W. BRAEMERE OWNERS' ASSOCIATION BETTE DERRER 104 WEST BRAEMERE ROAD BOISE, IDAHO 83702	BETTE DERRER 104 W. BRAEMERE RD. BOISE, IDAHO 83702 3. Incorporated Under The Laws of STATE OF IDAHO																									
4. Names and Addresses of Officers and Directors																											
President: Secretary: Directors:	<table border="1"> <thead> <tr> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>Bette Derrer</td> <td>104 W Braemere</td> <td>Boi</td> <td>EX-10</td> <td>83702</td> </tr> <tr> <td>Dean Summers</td> <td>106 W Braemere</td> <td>"</td> <td>"</td> <td>"</td> </tr> <tr> <td>Warren Murphy</td> <td>114 W Braemere</td> <td>"</td> <td>"</td> <td>"</td> </tr> <tr> <td>Zoster Lund</td> <td>118 W Braemere</td> <td>"</td> <td>"</td> <td>"</td> </tr> </tbody> </table>		Name	Street or P.O. Address	City	State	Zip	Bette Derrer	104 W Braemere	Boi	EX-10	83702	Dean Summers	106 W Braemere	"	"	"	Warren Murphy	114 W Braemere	"	"	"	Zoster Lund	118 W Braemere	"	"	"
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Zoster Lund	118 W Braemere	"	"	"																							
5. Nature of Business	6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. Signature <u>Bette Derrer</u> Date <u>7/24/87</u> Name (Typed or Printed) _____ Title _____																										