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|--------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|----------------------------------------------------------------|---------|-------------|--|
| No. <b>C 164999</b>                                                                                                                                    |                    | <b>Due no later than Feb 28, 2013</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>MOUNTAIN VIEW AT FARRAGUT PARK HOMEOWNERS<br>ASSOCIATION, INC.<br>TOM W. TORGERSON<br>4808 FERNAN HILL RD<br>COEUR D'ALENE ID 83814<br>USA |               | TOM TORGERSON<br>4808 FERNAN HILL RD<br>COEUR D'ALENE ID 83814 |         |             |  |
|                                                                                                                                                        |                    |                                                                                                                                                                                                         |               | 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                                                                                                                                               | KATHLEEN TORGERSON | 4808 FERNAN HILL RD                                                                                                                                                                                     | COEUR D'ALENE | ID                                                             | USA     | 83814       |  |
| DIRECTOR                                                                                                                                               | NAT BUSH           | 4804 PRESLEY RD                                                                                                                                                                                         | COEUR D'ALENE | ID                                                             | USA     | 83814       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>C 164999</b>                                                                                          |                    | 6. Annual Report must be signed.*<br>Signature: Tom Torgerson<br>Name (type or print): Tom Torgerson                                                                                                    |               |                                                                |         |             |  |
|                                                                                                                                                        |                    | Date: 12/30/2012<br>Title: President                                                                                                                                                                    |               |                                                                |         |             |  |
| Processed 12/30/2012                                                                                                                                   |                    | * Electronically provided signatures are accepted as original signatures.                                                                                                                               |               |                                                                |         |             |  |