

No. C 156244		Due no later than Aug 31, 2012 Annual Report Form		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. TUSCANY COMMERCIAL PLAZA ASSOCIATION, INC. BRAD C. FRASURE 444 HOPITAL WAY STE 555 POCATELLO ID 83201		BRAD FRASURE 444 HOSPITAL WAY STE 555 POCATELLO ID 83201			
						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	BRAD FRASURE	444 HOPITAL WAY STE 555	POCATELLO	ID	USA	83201	
DIRECTOR	BILLY B ISLEY	444 HOSPITAL WAY STE 555	POCATELLO	ID	USA	83201	
5. Organized Under the Laws of: ID C 156244		6. Annual Report must be signed.* Signature: Brad Frasure Name (type or print): Brad Frasure					
Processed 09/18/2012		* Electronically provided signatures are accepted as original signatures. Date: 09/18/2012 Title: Director					