

July 24, 1996

Gary Asin  
Piedmont Subdivision Homeowners C108419  
500 W Idah Ste 240  
Boise ID 83702

RE: Piedmont Subdivision Homeowners C108419

Greetings:

Please find enclosed your recently submitted annual report for the 1996-1997 fiscal year. We are unable to accept it in its present form. Please make the following correction(s) and return to this office.

Please be certain that the names and addresses of the officers in block 4 are complete. (A notation that the information is the same as last year will not be accepted.) After completing that block, resubmit the annual report to this office.

If you have any questions or need further assistance, please do not hesitate to contact this office at (208) 332-2811.

Very truly yours,



Sheryl DeVries  
Corporate Division

Enclosures: cited

No. C108419	<b>Annual Report Form</b> 1996 Due No Later Than November 30.		2. Registered Agent and Office NOT A P.O. BOX																																					
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FEE REQUIRED</b>  <b>* FIRST NOTICE *</b>	1. Mailing Address - Please Correct If Not Correct  PIEDMONT SUBDIVISION HOMEOWN GARY C ASIN 500 W IDAHO STE 240  BOISE ID 83702		GARY C ASIN 500 W IDAHO STE 240  BOISE ID 83702  3. Organized Under the Laws of:  ID C108419																																					
4. Corporations: Enter Names and Addresses of <b>President, Secretary and Directors</b> Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> <b>Managers</b> or <input type="checkbox"/> <b>Members</b> (check one)  <table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>					Office held	Name	Street or P.O. Address	City	State	Zip																														
Office held	Name	Street or P.O. Address	City	State	Zip																																			
5. NATURE OF BUSINESS  MAINTAIN COMMON AREAS		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><i>Gary C. Asin</i></u> Date <u>7/22/96</u> Name <u>GARY C. ASIN</u> Title <u>PARTNER</u>																																						

ISSUED: 07-06-1996

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