No. C 156324		Due no later than Sep 30, 2009 Annual Report Form 1. Mailing Address: Correct in this box if needed. CAPE OF ART COMMUNITY HOMEOWNERS ASSOCIATION, INC. DAN JACOBSON PO BOX 905 SANDPOINT ID 83864		2. Registered Agent and Address (NO PO BOX) DAN S JACOBSON 506 W ALDER STE 200 SANDPOINT ID 83864 3. New Registered Agent Signature:*											
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE															
								4. Corporations: Enter	Names and Busin	ess Addresses of Pres	ident, Secretary, and Directors. Treasurer	(optional).			
								Office Held	Name		Street or PO Address	City	State	Country	Postal Code
DIRECTOR	JEFF & CIND	Y BOND	450 KIENHOLZ DRIVE	HOPE	ID	USA	83836								
DIRECTOR	JOHN & LYNDA GILHAM		463 KIENHOLZ DRIVE	HOPE	ID	USA	83836								
DIRECTOR	DAN JACOBSON		P.O. BOX 905	SANDPOINT	ID	USA	83864								
DIRECTOR	CHRISTIAN & SAN GROENKE		249 KIENHOLZ DRIVE	HOPE	ID	USA	83836								
DIRECTOR	KLAUS & GISELA GROENKE		322 KIENHOLZ DRIVE	HOPE	ID	USA	83864								
DIRECTOR	DENNIS & MILA LOPEZ		286 KIENHOLZ DRIVE	HOPE	ID	USA	83836								
DIRECTOR	DAVE & SHEILA MEYERS		234 WEST SAN RAMON	FRESNO	CA	USA	93704								
SECRETARY			517 ALEXANDER WAY	SANDPOINT	ID	USA	83864								
PRESIDENT	ALLISON GIL	MORE	P.O. BOX 905	SANDPOINT	ID	USA	83864								
5. Organized Under the Laws of:		6. Annual Report mu													
ID		Signature: Gayla Babcock		Date: 07/29/2009											
C 156324		Name (type or print): Gayla Babcock		Title: Secretary-Treasurer											
Processed 07/29/2009)	* Electronically provide	ded signatures are accepted as original sic	inatures.											