No. <b>C 105383</b>		Due	2. Registered Agent and Address (NO PO BOX)					
Return to:		Annual Report Form			INTEGRITY MANAGEMENT SERVICES  465 E FAIRBROOK DR  BOISE ID 83706			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  ORIDA RIDGE NO. 2 HOMEOWNERS' ASSOCIATION, INC. JUANITA THIEL PO BOX 50132 BOISE ID 83705 USA		N 17 17 17 17 17 17 17 17 17 17 17 17 17				
				3. New Registered Agent Signature:*				
				3. <u>INEW</u> Regist	3. <u>New</u> Registered Agent Signature.			
RECEIVED BY DUE DATE								
4. Corporations: Enter N	lames and Busin	ess Addresses of F	resident, Secretary, and Directors. Treasure	r (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR DIANE SCHRO		OEDER	550 E. SUNNYRIDGE COURT	BOISE	ID	USA	83702	
DIRECTOR JUSTIN ATK		INS	505 E. SUNNYRIDGE COURT	BOISE	ID	USA	83702	
DIRECTOR	JIM MORLAND		490 E. SUNNYRIDGE COURT	BOISE	ID	USA	83702	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 105383		Signature: Jua		Date: 03/20/2014				
		Name (type or		Title: Agent				
Processed 03/20/2014		* Electronically pr	ovided signatures are accepted as original si	gnatures.				