

INSTRUCTIONS ON REVERSE SIDE

No. 56324

Idaho Corporation Annual Report Form

Due No Later Than November 1,

2. Registered Agent and Office **NOT A P.O. BOX**

Return To

Secretary of State
Room 203, Statehouse
Boise, ID 83720

1. Mailing Address

MOUNTAIN SHADOWS IMPROVEMENT AS
THOMAS M. MALONEY
SOUTHWEST 830 FOUNTAINCHARLES W. HOSACK
2005 IRONWOOD BOULEVARD, #200

C. J. EUR D' ALENE ID 83814

3. Incorporated Under The Laws
of* FIRST NOTICE *
NO FEE REQUIRED

PULLMAN

WA 99163

ID
No: 56324

4. Names and Addresses of Officers and Directors

MUST BE PRINTED OR TYPED

Name	Street or P.O. Address	City	State	Zip
President: THOMAS M. MALONEY	SW 830 FOUNTAIN	PULLMAN	WA	99163
Secretary: ROY RELLERIN	NW 1215 CLIFFORD	PULLMAN	WA	99163
Directors: GEORGE SCOTT	E. 1216 54TH ST	SPOKANE	WA	99223
PATTI RELLERIN	NW 1215 CLIFFORD	PULLMAN	WA	99163
ROBT. & DOROTHY HOWELL	SE 1610 SPRING ST.	PULLMAN	WA	99163
JERRY & LINDA BOYD	S. 4133 STONE	SPOKANE	WA	99203
CHRISTINE LARSON	2114 WALL ST	SPOKANE	WA	99203
JAMES & DEBORAH KING	21110 PLACERITA CYN RD.	NEWHALL	CA	91321
HOWARD & MARY JANE NEILL	RT. 1, BOX 106	PULLMAN	WA	99163
STEVE & MARTHA HASKELL	E. 1901 WESTMINISTER LANE	SPOKANE	WA	99223

5. Nature of Business

NON-PROFIT HOME
OWNERS ASSOCIATION

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

Name (Typed or Printed)

THOMAS M. MALONEY
THOMAS M. MALONEY

Date

Title

8-19-93

PRESIDENT