

August 2, 1996

Treasurer  
Hampton Homes Home-Owners C75720  
925 N Dove Lane  
Boise ID 83704

RE: Hampton Homes Home-Owners C75720

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.

The annual report must be signed by an authorized individual designated by the Board of the corporation.

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. <b>C 75720</b>	<b>Annual Report Form</b> 1996 <i>Due No Later Than November 30,</i>	2. Registered Agent and Office <b>NOT A P.O. BOX</b> <del>300 BELANGER</del> <b>LOIS LLOID</b> <del>10070 W MESQUITE LANE</del> <b>10077 W MESQUITE LANE</b> <b>BOISE</b> <b>ID 83704</b>
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FEE REQUIRED</b>	1. Mailing Address - Please Correct, If Not Correct  <b>HAMPTON HOMES HOME-OWNERS AS</b> <b>TREASURER</b> <b>925 N DOVE LANE</b>	3. Organized Under the Laws of:  <b>ID</b> <b>C 75720</b>
* <b>FIRST NOTICE</b> * <b>BOISE</b> <b>ID 83704</b>		
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)		
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>
<b>President</b>	<b>Lois Lloid</b>	<b>10077 W. Mesquite Ln</b>
<b>V-Pres</b>	<b>Ward Spencer</b>	<b>870 N. Hampton Rd</b>
<b>Secretary</b>	<b>Georgena Mills</b>	<b>10035 W. Mesquite Ln</b>
<b>Treasurer</b>	<b>Anthony Glorfield</b>	<b>10148 W. Mesquite Ln</b>
<b>Directors</b>	<b>Phyllis Barth</b>	<b>886 N. Ancestor Ln</b>
	<b>Shawn Marcoulrier</b>	<b>10161 W. Mesquite Ln</b>
	<b>Daniel Sanchez</b>	<b>934 N. Ancestor Ln</b>
	<b>Joe Tulley</b>	<b>10147 W. Mesquite Ln</b>
5. <b>NATURE OF BUSINESS</b> <b>HOMEOWNERS ASSOCIATION</b> <del><b>PROPERTY MAINTENANCE</b></del>	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 _____ Date <b>1 AUGUST 1996</b> Name <small>(Typed or Printed)</small> <b>GEORGENA MILLS</b> Title <b>SECRETARY</b>	

ISSUED: 07-06-1996

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