

|                                                                                                                                                        |                 |                                                                                                                                                              |           |                                                    |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----------------------------------------------------|---------|-------------|--|
| No. <b>C 176618</b>                                                                                                                                    |                 | <b>Due no later than Jan 31, 2013</b>                                                                                                                        |           | 2. Registered Agent and Address <b>(NO PO BOX)</b> |         |             |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                 | <b>1. Mailing Address: Correct in this box if needed.</b><br>FENWAY PARK HOMEOWNER'S ASSOCIATION, INC.<br>TRICIA CALLIES<br>1715 W BANNOCK<br>BOISE ID 83702 |           | TRICIA CALLIES<br>1715 W BANNOCK<br>BOISE ID 83702 |         |             |  |
|                                                                                                                                                        |                 |                                                                                                                                                              |           | 3. <u>New</u> Registered Agent Signature:*         |         |             |  |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).                                      |                 |                                                                                                                                                              |           |                                                    |         |             |  |
| Office Held                                                                                                                                            | Name            | Street or PO Address                                                                                                                                         | City      | State                                              | Country | Postal Code |  |
| DIRECTOR                                                                                                                                               | TODD JOHNSON    | 8921 NOTTINGHAM PL                                                                                                                                           | LAJOLLA   | CA                                                 | USA     | 92037       |  |
| DIRECTOR                                                                                                                                               | STEVE FIGUIREDO | 1783 EMBASSY CIRCLE                                                                                                                                          | LIVERMORE | CA                                                 | USA     | 94550       |  |
| DIRECTOR                                                                                                                                               | RAY MCNEIL      | 5964 CYPRESS PT DR                                                                                                                                           | LIVERMORE | CA                                                 | USA     | 94511       |  |
| 5. Organized Under the Laws of:<br><b>ID<br/>C 176618</b>                                                                                              |                 | 6. Annual Report must be signed.*<br>Signature: Tricia Callies<br>Name (type or print): Tricia Callies<br>Date: 11/14/2012<br>Title: Agent                   |           |                                                    |         |             |  |
| Processed 11/14/2012                                                                                                                                   |                 | * Electronically provided signatures are accepted as original signatures.                                                                                    |           |                                                    |         |             |  |