

No. <b>47358</b>  Return To  Secretary of State Room 203, Statehouse Boise, ID 83720 RECEIVED SEC. OF STATE NO FEE REQUIRED <b>89 JUL 14 AM 9 12</b>	<b>Idaho Corporation Annual Report Form</b> Due No Later Than November 1, 1989 1. Mailing Address — Please Correct <b>47358</b> <del>PONDEROSA LANDOWNERS ASSOCIATION</del> <b>PATRICIA BENNETT</b> <b>P.O. BOX 763</b> RECEIVED SEC. OF STATE CASCAD <b>89 JUL 28 AM 9 21</b> ID <b>83611</b>	2. Registered Agent and Office <b>ORIN MAKINSON</b> <b>BOX 724</b>  <b>CASCADE</b> ID <b>83611</b>  3. Incorporated Under The Laws of <b>IDAHO</b>  NO: <b>47358</b>																														
4. Names and Addresses of Officers and Directors <table border="0"> <thead> <tr> <th></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President:</td> <td colspan="5"><i>No change since last yr.</i></td> </tr> <tr> <td>Secretary:</td> <td><b>ORIN MAKINSON</b></td> <td><b>Box 724</b></td> <td><b>CASCADE</b></td> <td><b>ID</b></td> <td><b>83611</b></td> </tr> <tr> <td>Directors:</td> <td><b>PATRICIA BENNETT</b></td> <td><b>Box 763</b></td> <td><b>CASCADE</b></td> <td><b>ID</b></td> <td><b>83611</b></td> </tr> <tr> <td></td> <td><b>CHARLES MATTHESEN</b></td> <td></td> <td><b>NAMPA</b></td> <td><b>ID</b></td> <td><b>83651</b></td> </tr> </tbody> </table>				<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President:	<i>No change since last yr.</i>					Secretary:	<b>ORIN MAKINSON</b>	<b>Box 724</b>	<b>CASCADE</b>	<b>ID</b>	<b>83611</b>	Directors:	<b>PATRICIA BENNETT</b>	<b>Box 763</b>	<b>CASCADE</b>	<b>ID</b>	<b>83611</b>		<b>CHARLES MATTHESEN</b>		<b>NAMPA</b>	<b>ID</b>	<b>83651</b>
	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>																											
President:	<i>No change since last yr.</i>																															
Secretary:	<b>ORIN MAKINSON</b>	<b>Box 724</b>	<b>CASCADE</b>	<b>ID</b>	<b>83611</b>																											
Directors:	<b>PATRICIA BENNETT</b>	<b>Box 763</b>	<b>CASCADE</b>	<b>ID</b>	<b>83611</b>																											
	<b>CHARLES MATTHESEN</b>		<b>NAMPA</b>	<b>ID</b>	<b>83651</b>																											
5. Nature of Business <b>Home Owners Assoc.</b> <b>of Subdivision.</b>	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 <i>[Signature]</i> Date <b>7/10/89</b> Name (Typed or Printed) <b>ORIN MAKINSON</b> Title <b>Last Elected Pres.</b>																															