

No. C 52932	Annual Report Form Due No Later Than November 30, 1996	2. Registered Agent and Office NOT A P.O. BOX RALSTON W ADAMS RT 1 BOX 224-53 RT FITZGERALD RT1 BOX 224-30 SALMON ID 83467																																																						
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED	1. Mailing Address - Please Correct, If NOT Correct SUNSET HEIGHTS RECREATION AS RT . 1 BOX 224-30 SALMON ID 83467	3. Organized Under the Laws of: ID C 52932																																																						
4. Corporations: Enter Names and Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one)																																																								
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Office held</th> <th style="width: 35%;">Name</th> <th style="width: 30%;">Street or P.O. Address</th> <th style="width: 15%;">City</th> <th style="width: 10%;">State</th> <th style="width: 15%;">Zip</th> </tr> </thead> <tbody> <tr> <td>PRESIDENT</td> <td>MATTHEW HIGHTREE</td> <td>P.O. BOX 918</td> <td>SALMON</td> <td>ID</td> <td>83467</td> </tr> <tr> <td>VICE PRESIDENT</td> <td>MICHAEL LINGR</td> <td>RT1 BOX 224-56</td> <td>SALMON</td> <td>ID</td> <td>83467</td> </tr> <tr> <td>SEC/TRES.</td> <td>PATRICIA A. FITZGERALD</td> <td>RT1 BOX 224-30</td> <td>SALMON</td> <td>ID</td> <td>83467</td> </tr> <tr> <td>BOARD OF DIRECTOR</td> <td>KATHY HIGHTREE</td> <td>P.O. BOX 918</td> <td>SALMON</td> <td>ID</td> <td>83467</td> </tr> <tr> <td>DIRECTOR</td> <td>RICK SCHROEDER</td> <td>RT1 BOX 224-60</td> <td>SALMON</td> <td>ID</td> <td>83467</td> </tr> <tr> <td>DIRECTOR</td> <td>DAVID TUCK</td> <td>RT1 BOX 224-11</td> <td>SALMON</td> <td>ID</td> <td>83467</td> </tr> <tr> <td>DIRECTOR</td> <td>JULIE TUTOR</td> <td>RT1 BOX 224-99</td> <td>SALMON</td> <td>ID</td> <td>83467</td> </tr> <tr> <td>DIRECTOR</td> <td>RON FISHER</td> <td>RT1 BOX 224-15</td> <td>SALMON</td> <td>ID</td> <td>83467</td> </tr> </tbody> </table>			Office held	Name	Street or P.O. Address	City	State	Zip	PRESIDENT	MATTHEW HIGHTREE	P.O. BOX 918	SALMON	ID	83467	VICE PRESIDENT	MICHAEL LINGR	RT1 BOX 224-56	SALMON	ID	83467	SEC/TRES.	PATRICIA A. FITZGERALD	RT1 BOX 224-30	SALMON	ID	83467	BOARD OF DIRECTOR	KATHY HIGHTREE	P.O. BOX 918	SALMON	ID	83467	DIRECTOR	RICK SCHROEDER	RT1 BOX 224-60	SALMON	ID	83467	DIRECTOR	DAVID TUCK	RT1 BOX 224-11	SALMON	ID	83467	DIRECTOR	JULIE TUTOR	RT1 BOX 224-99	SALMON	ID	83467	DIRECTOR	RON FISHER	RT1 BOX 224-15	SALMON	ID	83467
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5. NATURE OF BUSINESS SUBDIVISION RECREATION	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 <u>Matthew Hightree</u> Date <u>9/7/96</u> AREA (Typed or Printed) Name <u>Matthew Hightree</u> Title <u>President</u>																																																							

ISSUED: 07-06-1996

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