No. W 67165		Due no later than Oct 31, 2014		2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF		Annual Report Form 1. Mailing Address: Correct in this box if needed. HOMEOWNERS' ASSOCIATIONS PROPERTY MANAGEMENT COMPANY, LLC BETH ELLEN PUNCHES PO BOX 1255 EAGLE ID 83616		1465 NORT EAGLE ID	BETH ALLEN PUNCHES 1465 NORTH ELLINGTON PLACE EAGLE ID 83616 3. New Registered Agent Signature:*			
RECEIVED BY DUE DATE								
4. Limited Liability Compan	ies: Enter Nar	nes and Addresses	of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER	BETH ELLEN	PUNCHES	PO BOX 1255	EAGLE	ID	USA	83616	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Beth		Date: 09/15/2014				
W 67165		Name (type or		Title: Manager				
Processed 09/15/2014 * Electronically provided signatures are accepted as original signatures.								