		FILED EFFECTIVE
No. C 107355	Reinstatement Annual Report Form ADMIN DISSOLVED 12/01/2014	2. Registered Agent and Office (NOT A P.O. BOX) DAVID RYAN Doyle Allen
SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed. 353 PLANTATION CREEK HOMEOWNER'S ASSOCIATION, INC. TORY PEARSE Dayle Allen -3560 N ROCK CREEK LN	3581 N ROCK CREEK LN BOISE ID 83703 Sec/Trens
REINSTATEMENT FEE	BOISE ID 83703	3. New Registered Agent Signature.
DUE: \$30.00		Dayle W- alla
4. Corporations: Enter Names and Business Addresses of President, Secretary, Diffectors, Treasurer, Vice Pres. Office Held Name Street or PO Address City State Country Postal Code President Tory Pearse 3560 N. Rock Creekth B075c ID B3703 Vice Pres. David Ryan 3581 N. Rock Creek Ln B075 e ID B3703 Sec/Trees Doyle Allen 3537 N. Rock Creek Ln B075e, ID B3703		
5. Organized Under the La	1	
IDAHO	Signature: W. alla	July 9, 2015
C 107355	Name (type of print): Doyle W. Allen	Sec/Treas
Issued 06/24/2015 by SLD		

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the corrected address **must** be inside Block 1.

Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. **Note:** The office of the registered agent must be at a street address in Idaho, **not a Post Office Box or Personal Mail Box.**

Block 3: Only a <u>new</u> registered agent must sign in Block 3.

Block 4: Enter names and business addresses of president, secretary, and directors. Note: <u>DO NOT</u> put "same as last year" or "same as above". These will not be accepted. Changes here will not affect the address in Block 1. If more space is needed please add an attachment.