

REINSTATEMENT

No. C 173458	Annual Report Form ADMIN DISSOLVED 09/04/2008		2. Registered Agent and Office NOT A P.O. BOX
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 FEE DUE \$30.00	1. Mailing Address - Correct in this box, if applicable LANCASTER VILLA PROPERTY OWNERS ASS 2498 N HEATH AVE <i>1949 Canyon Trail Way</i> BOISE, ID 83718 <i>Twin Falls, Idaho</i> <i>83301</i>		MICHAEL G SUMMERS 2498 N HEATH AVE BOISE, ID 83743 1949 Canyon Trail Way Twin Falls, Idaho 83301
		3. <u>New registered agent signature</u>	
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of management. Limited and Limited Liability Partnerships: Enter names and addresses of at least two (2) partners. Office held <u>Name</u> <u>Street or P.O. Address</u> <u>City</u> <u>State</u> <u>Zip</u> Manager? Reg. Agent <i>Michael Summers</i> <i>1949 Canyon Trail Way</i> <i>Twin Falls</i> <i>Idaho</i> <i>83301</i> Manager <i>Steven D. Tobias</i> <i>1238 W. Jordan River Dr.</i> <i>South Jordan</i> <i>Utah</i> <i>84095</i>			
5. Organized under the laws of: IDAHO C 173458		6. Signature <u><i>Steven D. Tobias</i></u> Date <u><i>3-15-2009</i></u> Name <small>(Typed or Printed)</small> <u><i>Steven D Tobias</i></u> Title <u><i>Manager</i></u>	