

|  |  |   |   |       |         |             |
|--|--|---|---|-------|---------|-------------|
| No. <b>C 141246</b>  | <b>Due no later than Nov 30, 2013</b><br><b>Annual Report Form</b>   | 2. Registered Agent and Address <b>(NO PO BOX)</b>                        |   |       |         |             |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> | <b>1. Mailing Address: Correct in this box if needed.</b><br>POINTE AT TWO RIVERS HOMEOWNERS ASSOCIATION, INC.<br>(THE)<br>CARLA EVERHART<br>664 RIVERSHORE LN STE 152<br>EAGLE ID 83616 | ADVANTAGE IDAHO INC<br>664 RIVERSHORE LN STE 152<br>EAGLE ID 83616        |   |       |         |             |
|  |  | 3. <u>New</u> Registered Agent Signature:*                                |   |       |         |             |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).                                      |  |   |   |       |         |             |
| Office Held  | Name   | Street or PO Address  | City                                      | State | Country | Postal Code |
| VICE PRESIDENT   | SCOTT KEYSER   | 917 W SHEARWATER LN   | EAGLE                                     | ID    | USA     | 83616       |
| DIRECTOR   | BRIAN BURNETT  | 1125 W TWO RIVERS LN  | EAGLE                                     | ID    | USA     | 83616       |
| PRESIDENT  | VICTOR MILLER  | 834 W TWO RIVERS DR   | EAGLE                                     | ID    | USA     | 83616       |
| SECRETARY  | TRACEY WALCOTT   | 912 W SHEARWATER LN   | EAGLE                                     | ID    | USA     | 83616       |
| DIRECTOR   | DAVID ZANECKI  | 909 W TWO RIVERS LN   | EAGLE                                     | ID    | USA     | 83616       |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>C 141246</b>  | 6. Annual Report must be signed.*<br>Signature: Carla Everhart<br>Name (type or print): Carla Everhart   |   | Date: 02/04/2014<br>Title: Managing Agent |       |         |             |
| Processed 02/04/2014   |  | * Electronically provided signatures are accepted as original signatures. |   |       |         |             |