No. W 3989		Due no later than May 31, 2013		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. NORTH COLLEGE CONDOMINIUM ASSOCIATION, L.L.C. JAMES DEKLEINHANS PO BOX 716 HAGERMAN ID 83332		4849 RIVER R	JAMES DEKLEINHANS 4849 RIVER ROAD			
				BUHL ID 83316 3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compa	nies: Enter Na	mes and Addresses	of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER 3RD & 3RD II		NVESTORS	401 2ND ST N STE 201	TWIN FALLS	ID	USA	83301	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: James Dekleinhans		Date: 03/21/2013				
W 3989		Name (type or	Title: Member					
Processed 03/21/2013	* Electronically provided signatures are accepted as original signatures.							