

No. C 163519	Due no later than Nov 30, 2014 Annual Report Form	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 RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. SKY RANCH WATER USERS ASSOCIATION, INC. P.O. BOX 1667 NAMPA ID 83653	MICHAEL WHIPPLE 1311 11TH STREET SOUTH NAMPA ID 83686				
		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
DIRECTOR	ROBERT WOLFE	2087 S. TOLLGATE WAY	BOISE	ID	USA	83709
DIRECTOR	RICHARD FORCIER	111 MOUNTAIN VIEW AVE	CALDWELL	ID	USA	83605
DIRECTOR	MICHAEL WHIPPLE	1311 11TH SOUTH	NAMPA	ID	USA	83651
5. Organized Under the Laws of: ID C 163519	6. Annual Report must be signed.* Signature: michael whipple Name (type or print): michael whipple		Date: 09/30/2014 Title: director			
Processed 09/30/2014		* Electronically provided signatures are accepted as original signatures.				