No. C 159316		Due no later than Mar 31, 2006			2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		ROBE	ROBERT L MATHEWS			
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.			3805 SW 2ND AVE			
		CODR ESTATES WATER ASSOCIATION LIMITED ROBERT L MATHEWS 3805 SW 2ND AVE		NEVV	NEW PLYMOUTH ID 83655 0000			
		NEW PLYMOUTH ID 83655 0000			3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter N	lames and Busin	ess Addresses of F	President, Secretary, and Directors. Trea	asurer (optional)).			
Office Held	Name		Street or PO Address	City		State	Country	Postal Code
DIRECTOR	ROBERT L I	MATHEWS	3805 SW 2ND AVE	NEW P	LYMOUTH	ID	USA	83655
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
IDA HO C 159316		Signature: Robert L. Mathews			Date: 01/06/2006			
		Name (type or print): Robert L. Mathews			Title: Director			
Processed 01/06/2006		* Electronically pr	ovided signatures are accepted as origin	nal signatures.				