No. C 86839		Due no later than Jun 30, 2016		2	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		Annual Report Form 1. Mailing Address: Correct in this box if needed. TAMARACK ESTATES WATER ASSOCIATION, INC. WILLIAM R BOHNE 428 SHERWOODS ROAD SAGLE ID 83860			WILLIAM R BOHNE 428 SHERWOODS RD SAGLE ID 83860-8386 3. New Registered Agent Signature:*			
4. Corporations: Enter Nam	nes and Busin	ess Addresses of Preside	ent, Secretary, and Directors. Treas	urer (o	otional).			
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
SECRETARY		A CORCORAN	451 SHERWOODS ROAD		SAGLE	ID	USA	83860
TREASURER	MARGARITE _CORCORAN	(AMIDDLE_NAME)	451 SHERWOODS ROAD		SAGLE	ID	USA	83860
PRESIDENT	WILLIAM R	BOHNE	428 SHERWOODS RD		SAGLE	ID	USA	83860
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 86839		Signature: willliam bohne			Date: 08/14/2016			
		Name (type or print): willliam bohne			Title: President			
Processed 08/14/2016		* Electronically provided	l signatures are accepted as origina	l signat	ures.			