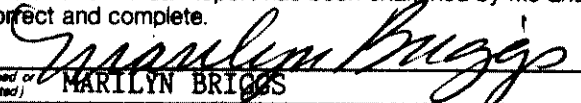
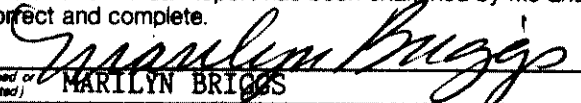
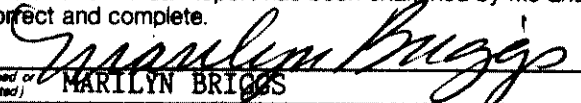


INSTRUCTIONS ON REVERSE SIDE

No. 02422	Idaho Corporation Annual Report Form Due No Later Than November 1, 1991		2. Registered Agent and Office NOT A P.O. BOX REED MOSS 385 E STREET IDAHO FALLS ID 83401																									
Return To Secretary of State Room 203, Statehouse Boise, ID 83720 NO FEE REQUIRED	1. Mailing Address - Please Correct, If Not Correct		3. Incorporated Under The Laws of ID NO: 062422																									
	TETON HEIGHTS WATER CORPORA ED TOMAN 3803 S. REDWOOD RD. SALT LAKE CITY UT 84119																											
4. Names and Addresses of Officers and Directors <table border="1"> <thead> <tr> <th></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President:</td> <td>ED TOMAN</td> <td>1945 SPRINGCREEK DR.</td> <td>BOUNTIFUL</td> <td>UTAH</td> <td>84010</td> </tr> <tr> <td>Secretary:</td> <td>MARILYN BRIGGS</td> <td>4467 SO. LARCH WAY</td> <td>SALT LAKE CITY</td> <td>UTAH</td> <td>84123</td> </tr> <tr> <td>Directors:</td> <td>DAN SIEGEL</td> <td>4345 ZARAHEMLA DR.</td> <td>SALT LAKE CITY</td> <td>UTAH</td> <td>84124</td> </tr> </tbody> </table>						<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President:	ED TOMAN	1945 SPRINGCREEK DR.	BOUNTIFUL	UTAH	84010	Secretary:	MARILYN BRIGGS	4467 SO. LARCH WAY	SALT LAKE CITY	UTAH	84123	Directors:	DAN SIEGEL	4345 ZARAHEMLA DR.	SALT LAKE CITY	UTAH	84124
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5. Nature of Business WATER FOR SUBDIVISION	6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. <table border="1"> <tr> <td data-bbox="546 910 687 963"> Signature <small>(Typed or Printed)</small> MARILYN BRIGGS </td> <td data-bbox="687 910 1215 963">  </td> <td data-bbox="1215 910 1595 963"> Date 7/22/91 Title SECRETARY </td> </tr> </table>				Signature <small>(Typed or Printed)</small> MARILYN BRIGGS		Date 7/22/91 Title SECRETARY																					
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