

No. 0528	<b>Idaho Corporation Annual Report Form</b> Due No Later Than November 1, 1991	2. Registered Agent and Office NOT A P.O. BOX  WARREN H. MERRILL ROUTE 5  JEROME ID 83338																								
Return To  <b>Secretary of State          Room 203, Statehouse          Boise, ID 83720</b>   NO FEE REQUIRED	I Mailing Address: Please Correct If Not Correct  MAGIC WESTSIDE WATER USERS, HAZEL MCINTYRE 158 RIDGEWAY DRIVE  TWIN FALLS ID 83301	3. Incorporated Under The Laws of ID  NO: 049528																								
4. Names and Addresses of Officers and Directors																										
<table border="1"> <thead> <tr> <th data-bbox="34 405 409 437"></th> <th data-bbox="414 405 1058 437"><u>Name</u></th> <th data-bbox="1063 405 1306 437"><u>Street or P.O. Address</u></th> <th data-bbox="1311 405 1356 437"><u>City</u></th> <th data-bbox="1361 405 1455 437"><u>State</u></th> <th data-bbox="1460 405 1609 437"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td data-bbox="34 447 409 479">President:</td> <td data-bbox="414 447 1058 479">Bob Combs</td> <td data-bbox="1063 447 1306 479">5605 Fremont</td> <td data-bbox="1311 447 1356 479">Boise</td> <td data-bbox="1361 447 1455 479">Ida</td> <td data-bbox="1460 447 1609 479">83704</td> </tr> <tr> <td data-bbox="34 483 409 514">Secretary:</td> <td data-bbox="414 483 1058 514">Daisy Combs</td> <td data-bbox="1063 483 1306 514">"</td> <td data-bbox="1311 483 1356 514">"</td> <td data-bbox="1361 483 1455 514">"</td> <td data-bbox="1460 483 1609 514">"</td> </tr> <tr> <td data-bbox="34 518 409 550">Directors:</td> <td data-bbox="414 518 1058 550">Warren Merrill</td> <td data-bbox="1063 518 1306 550">Rt. 5</td> <td data-bbox="1311 518 1356 550">Jerome</td> <td data-bbox="1361 518 1455 550">Ida</td> <td data-bbox="1460 518 1609 550">83338</td> </tr> </tbody> </table>				<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President:	Bob Combs	5605 Fremont	Boise	Ida	83704	Secretary:	Daisy Combs	"	"	"	"	Directors:	Warren Merrill	Rt. 5	Jerome	Ida	83338
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5. Nature of Business	6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.																									
	Signature <u>Hazel McIntyre</u> Name <small>(Typed or Printed)</small> <u>HAZEL MCINTYRE</u>	Date <u>7-16-91</u> Title <u>Treas.</u>																								