| No. <b>C 40305</b>  |            | Due no later than Feb 28, 2018   |                                  |  | 2. Registered Agent and Address (NO PO BOX) |       |         |             |
|---|------------|--|----------------------------------|--|---|-------|---------|-------------|
| Return to:  |            | Annual Report Form   |                                  | KYLE BENSON  |   |       |         |             |
| SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080                                  |            | 1. Mailing Address: Correct in this box if needed.  MUD CREEK WATER USER'S ASSOCIATION, INC.  KYLE BENSON P. O. BOX 281  BUHL ID 83316 |                                  | 1216 E 4356 N BUHL ID 83316  3. New Registered Agent Signature:* |   |       |         |             |
| NO FILING FEE IF<br>RECEIVED BY DUE DATE  |            |  |                                  |  |   |       |         |             |
| 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  | OWEN OLAH  |  | 1213 E 4400 N                    |  | BUHL  | ID    | USA     | 83316       |
| DIRECTOR  | TAMMY SCI  | EFER   | 1218 E 4369 N                    |  | BUHL  | ID    | USA     | 83316       |
| TREASURER   | BLAIR COME | BE   | 1148 E 4325 N                    |  | BUHL  | ID    | USA     | 83316       |
| SECRETARY   | BLAIR COME | ΒE   | 1148 E 4325 N                    |  | BUHL  | ID    | USA     | 83316       |
| VICE PRESIDENT  | CODY OWEN  | l  | 1186 E 4325 N                    |  | BUHL  | ID    | USA     | 83316       |
| PRESIDENT   | KYLE BENSC | N  | 1216 E 4356 N                    |  | BUHL  | ID    | USA     | 83316       |
| 5. Organized Under the Laws of:   |            | 6. Annual Report must be signed.*  |                                  |  |   |       |         |             |
| ID<br>C 40305   |            | Signature: Blair Combe   |                                  | Date: 01/21/2018   |   |       |         |             |
|   |            | Name (type or print): Blair Combe  |                                  | Title: Secretary/Treasurer                                       |   |       |         |             |
| Processed 01/21/2018  |            | * Electronically provide   | d signatures are accepted as ori | iginal signa   | atures.                                     |       |         |             |