

No. C 149067	Reinstatement Annual Report Form ADMIN DISSOLVED 08/05/2010		2. Registered Agent and Office (NOT A P.O. BOX) <i>Nita Branstetter</i> WARREN EDWARD OSBORN 4118 CAMPBELL RD. #04 Ketheria St. NEW MEADOWS ID 83654																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. GRANITE TWIN LAKES WATER USERS, INC. WARREN EDWARD OSBORN 4118 CAMPBELL RD NEW MEADOWS ID 83654 <i>Nita Branstetter</i> <i>PO Box 175</i> <i>New Meadows ID 83654</i>		3. New Registered Agent Signature. <i>Nita Branstetter</i>																																			
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors and (optional) Treasurer. <table border="1"> <thead> <tr> <th>Office Held</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Warren Edward Osborn</td> <td>4118 Campbell Rd.</td> <td>New Meadows</td> <td>ID</td> <td></td> <td></td> </tr> <tr> <td>V-President</td> <td>Director Charlotte Armacost</td> <td>New Meadows ID</td> <td>Adams</td> <td>CO</td> <td></td> <td>83654</td> </tr> <tr> <td></td> <td></td> <td>PO Box 219</td> <td></td> <td></td> <td></td> <td>83654</td> </tr> <tr> <td>Sec./Treas.</td> <td>Nita Branstetter</td> <td>PO Box 175</td> <td>New Meadows</td> <td>ID</td> <td></td> <td>83654</td> </tr> </tbody> </table>				Office Held	Name	Street or PO Address	City	State	Country	Postal Code	President	Warren Edward Osborn	4118 Campbell Rd.	New Meadows	ID			V-President	Director Charlotte Armacost	New Meadows ID	Adams	CO		83654			PO Box 219				83654	Sec./Treas.	Nita Branstetter	PO Box 175	New Meadows	ID		83654
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5. Organized Under the Laws of: IDAHO C 149067		6. Signature: <i>Nita Branstetter</i> Date: <i>8/16/10</i> Name (type or print): <i>Nita Branstetter</i> Title: <i>Secy</i> <i>Treas.</i>																																				
Issued 08/16/2010 by CLH																																						

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Pay special attention to the mailing address. If the correct address is not given in Block 1, strike it out and write in the