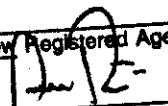
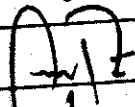
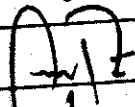
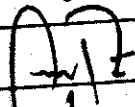


No. W 41745 Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	Due no later than August 31, 2007 Annual Report Form 1. Mailing Address - Correct in this box, if applicable TETON SPRINGS WATER AND SEWER COMPA 1 TETON SPRINGS PARK WY VICTOR, ID 83455	2. Registered Agent and Office NO PO BOX ANTHONY L VEST 1 TETON SPRINGS PARK WY VICTOR, ID 83455 3. New Registered Agent Signature 												
4. Limited Liability Companies: Enter Names and Addresses of Managers. <table border="1"><thead><tr><th>Office held</th><th>Name</th><th>Street or P.O. Address</th><th>City</th><th>State</th><th>Zip</th></tr></thead><tbody><tr><td>Director</td><td>Jon Pinardi</td><td>75 W. 950 S. Suite 3</td><td>Victor</td><td>ID</td><td>83455</td></tr></tbody></table>  Jon Pinardi 75 W. 950 S. Suite 3 VICTOR, ID 83455			Office held	Name	Street or P.O. Address	City	State	Zip	Director	Jon Pinardi	75 W. 950 S. Suite 3	Victor	ID	83455
Office held	Name	Street or P.O. Address	City	State	Zip									
Director	Jon Pinardi	75 W. 950 S. Suite 3	Victor	ID	83455									
5. Organized Under the Laws of: IDAHO W 41745	6. <table border="1"><tr><td>Signature</td><td></td><td>Date</td><td>6/28/07</td></tr><tr><td>Name (Typed or Printed)</td><td>Jon Pinardi</td><td>Title</td><td>Director</td></tr></table> 200708006474		Signature		Date	6/28/07	Name (Typed or Printed)	Jon Pinardi	Title	Director				
Signature		Date	6/28/07											
Name (Typed or Printed)	Jon Pinardi	Title	Director											

Do Not Tape or Staple