

No. C 190812		Due no later than Apr 30, 2012		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form 1. Mailing Address: Correct in this box if needed. 21.6 CW LATERAL ASSOCIATION, INC. KIMBERLY A CREEL 5982 SE 11TH AVE CALDWELL ID 83607		KIMBERLY CREEL 5982 SE 11TH AVE CALDWELL ID 83607			
				3. <u>New</u> Registered Agent Signature:*			
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	WADE CREEL	5982 SE 11TH AVE	CALDWELL	ID	USA	83607	
DIRECTOR	THOMAS REYNOLDS	5997 SE 11TH AVE	CALDWELL	ID	USA	83607	
5. Organized Under the Laws of: ID C 190812		6. Annual Report must be signed.* Signature: Kimberly Creel Name (type or print): Kimberly Creel Date: 04/02/2012 Title: Director					
Processed 04/02/2012		* Electronically provided signatures are accepted as original signatures.					