

No. C 127901		Due no later than Mar 31, 2009 Annual Report Form		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		1. Mailing Address: Correct in this box if needed. BENNETT MOUNTAIN SUBDIVISION NO. 1 WELL-USERS ASSOCIATION, INC. 1020 NW SCHMOLL RD MOUNTAIN HOME ID 83647		KYLE M PERKINS 1020 NW SCHMOLL RD MOUNTAIN HOME ID 83647			
						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	KYLE M PERKINS	1320 SCHMOLL RD	MOUNTAIN HOME	ID	USA	83647	
5. Organized Under the Laws of: ID C 127901		6. Annual Report must be signed.* Signature: Kyle Perkins Name (type or print): Kyle Perkins Date: 02/09/2009 Title: Director					
Processed 02/09/2009 * Electronically provided signatures are accepted as original signatures.							