

No. C 46160		Due no later than Sep 30, 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. SCHAEFFER ADDITIONS WATER ASSOCIATION, INC. COLLEEN E CARISS P. O. BOX 282 BAYVIEW ID 83803 USA		ARCHIE ORTH 34074 N FIR BAYVIEW ID 83803			
						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	
PRESIDENT	DAVE WILCOX	16085 E SCHAEFFER P O BOX 704	BAYVIEW	ID	USA	83803-0704	
SECRETARY	COLLEEN E CARISS	16260 E 5TH P O BOX 267	BAYVIEW	ID	USA	83803-0267	
5. Organized Under the Laws of: ID C 46160		6. Annual Report must be signed.* Signature: Colleen E Cariss Name (type or print): Colleen E Cariss					
Processed 10/28/2009		Date: 10/28/2009 Title: Secretary/Treasurer * Electronically provided signatures are accepted as original signatures.					