

REINSTATEMENT

No. 93496		Annual Report Form		2. Registered Agent and Office NOT A P.O. BOX <i>or Kathy</i>																			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON P.O. BOX 83720 BOISE, ID 83720-0000		1. Mailing Address - Please Correct, If Not Correct		CAREY E. PERKINS <i>Scott Lemmon</i> 3069 RANCHO VIA DR 5941 IDAHO FALLS ID 83406																			
FEE DUE \$20		RANCHO VIA WELL USERS' ASSOCIATION, INC. DAN STERNING <i>Phil Grimes</i> 5885 RANCHO VIA DR 3239 S. Rancho Via Dr. IDAHO FALLS ID 83406		3. Organized Under the Laws of: Idaho																			
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input checked="" type="checkbox"/> Managers or <input type="checkbox"/> Members (check one)																							
<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>President</td> <td>Phil Grimes</td> <td>3239 S. Rancho Via Dr.</td> <td>Idaho Falls,</td> <td>ID.</td> <td>83406</td> </tr> <tr> <td>Secretary</td> <td>Scott Lemmon <i>or Kathy</i></td> <td>5941 S. Rancho Via Dr.</td> <td>Idaho Falls,</td> <td>ID.</td> <td>83406</td> </tr> </tbody> </table>						Office Held	Name	Street or P.O. Address	City	State	Zip	President	Phil Grimes	3239 S. Rancho Via Dr.	Idaho Falls,	ID.	83406	Secretary	Scott Lemmon <i>or Kathy</i>	5941 S. Rancho Via Dr.	Idaho Falls,	ID.	83406
Office Held	Name	Street or P.O. Address	City	State	Zip																		
President	Phil Grimes	3239 S. Rancho Via Dr.	Idaho Falls,	ID.	83406																		
Secretary	Scott Lemmon <i>or Kathy</i>	5941 S. Rancho Via Dr.	Idaho Falls,	ID.	83406																		
5. Signature of New Registered Agent			6.																				
<i>Kathy Lemmon</i> 98 FEB 17 AM 9:39 SECRETARY OF STATE STATE OF IDAHO			Signature <i>Philip W Grimes</i> Date 12/25/97 Name (Typed or Printed) PHILIP W GRIMES Title PRESIDENT																				

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

- 1.) Please pay special attention to the mailing address. If it is incorrect, please make the appropriate corrections.
NOTE: The name of the business entity cannot be altered on the annual report form.
- 2.) If the registered agent has changed or moved, please make that correction on this form. The registered agent must be found IN IDAHO at a PHYSICAL ADDRESS. PO Boxes WILL NOT be accepted. If report is for a Limited Liability please refer to #4 below.
- 3.) Corporation: Enter names and addresses of ONLY the president, secretary, and directors in block 4.
Limited Liability Company: Enter the names and addresses of the managers or members in block 4.
NOTE: Putting "same as last year" WILL NOT be accepted.
- 4.) Limited Liability Company: If the registered agent has been changed in block 2, then the NEW registered agent must accept that position by signing in block 5.
- 5.) Corporation: Block 6 must be signed by an officer or chairman of the board of the corporation. Signer must specify his or her title.
Limited Liability Company: Block 6 must be signed by a manager or member, who must specify his or her title.
- 6.) If new registered Agent, please sign block 5.

BH: 82569
2/17/98

5-6946

1-4204