

|  |                |  |             |   |         |                   |  |
|--|----------------|--|-------------|---|---------|-------------------|--|
| No. <b>C 38453</b>   |                | <b>Due no later than May 31, 2015</b>  |             | 2. Registered Agent and Address <b>(NO PO BOX)</b>          |         |                   |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                | <b>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>OUTLET WATER ASSOCIATION, INC.<br>OFFICE SERVICES<br>PO BOX 846<br>PRIEST RIVER ID 83856 |             | BILL MCINERNEY<br>272 OUTLET BAY RD<br>PRIEST LAKE ID 83856 |         |                   |  |
|  |                |  |             | 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   | BILL MCINERNEY | 272 OULET BAY ROAD   | PRIEST LAKE | ID  | USA     | 83856             |  |
| 5. Organized Under the Laws of:  |                | 6. Annual Report must be signed.*  |             |   |         |                   |  |
| <b>ID<br/>C 38453</b>  |                | Signature: Kathy Mitchell  |             |   |         | Date: 05/14/2015  |  |
|  |                | Name (type or print): Kathy Mitchell   |             |   |         | Title: Bookkeeper |  |
| Processed 05/14/2015   |                | * Electronically provided signatures are accepted as original signatures.  |             |   |         |                   |  |