

No. <b>C 90915</b>	<b>Annual Report Form</b> Due No Later Than November 30, <b>1996</b>		2. Registered Agent and Office <b>NOT A P.O. BOX</b>
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FEE REQUIRED</b>	1. Mailing Address - Please Correct, If Not Correct  <b>IDAHO WATERS CO.</b> <b>NEIL LARSEN</b> <b>PO BOX 87</b>		<b>NEIL LARSEN</b> <b>3052 3 NORTH 3800 EAST</b>  <b>HANSEN</b> <b>ID 83334</b>
<b>* FIRST NOTICE *</b>	<b>HANSEN</b>	<b>ID 83334</b>	3. Organized Under the Laws of:  <b>ID</b> <b>C 90915</b>
4. Corporations: Enter Names and Addresses of <b>President, Secretary and Directors</b> Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> <b>Managers</b> or <input type="checkbox"/> <b>Members</b> (check one)			
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>
<u>State</u>	<u>Zip</u>		
<i>Pres.</i>	<i>NEIL H. LARSEN</i>	<i>P.O. Box 87</i>	<i>HANSEN</i>
<i>Secy/Treas.</i>	<i>Theresa E. LARSEN</i>	<i>"</i>	<i>"</i>
<i>"</i>	<i>"</i>	<i>"</i>	<i>"</i>
5. <b>NATURE OF BUSINESS</b>  <b>BOTTLED WATER &amp; DISTRIBUTORSHIPS</b>		6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. Signature <i>Neil H. Larsen</i> Date <i>9/26/96</i> Name <small>(Typed or Printed)</small> <i>NEIL H. LARSEN</i> Title <i>Pres.</i>	

ISSUED: 07-06-1996

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