

No. C 119904	Due no later than 6/30/2009 Annual Report Form	2. Registered Agent and Address (NO PO BOX) ALVIN E WILKIE 31435 CARAVELLE RD ATHOL ID 83801
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. DMS WATER ASSOCIATION, INC. PO BOX 765 ATHOL ID 83801	3. <u>New</u> Registered Agent Signature:

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

Office Held	Name	Street or PO Address	City	State	Zip
PRESIDENT	ALVINE WILKIE	31435 N. CARAVELLE RD.	ATHOL	ID	83801
VICE PRESIDENT	DON MOHLER	31260 N. CARAVELLE RD.	ATHOL	ID	83801
SECRETARY	ROBYN PHELPS	31361 N. CARAVELLE RD.	ATHOL	ID	83801

5. Organized Under the Laws of: ID C 119904	6. Annual Report must be signed. Signature: <u>Alvin E. Wilkie</u> Date: <u>7-25-09</u> Name(type or print): <u>ALVIN E. WILKIE</u> Title: <u>PRESIDENT</u>
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