No. C 27163		Due no later than May 31, 2018		2. Registered /	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. ROSWELL COOPERATIVE SEWERAGE CO. MIKE KELLY P.O. BOX 369 PARMA ID 83660		25660 STEF PARMA ID	MIKE KELLY 25660 STEPHEN LANE PARMA ID 83660 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Corporations: Enter Na	mes and Busin	ess Addresses o	f President, Secretary, and Directors. Treasi	urer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR	NORM BOND)	P.O. BOX 534	PARMA	ID	USA	83660	
DIRECTOR	NEDRA BENN	NETT	25927 STEPHEN LANE	PARMA	ID	USA	83660	
DIRECTOR	GARY HICKIV	IAN	P.O. BOX 441	PARMA	ID	USA	83660	
TREASURER	MIKE KELLY		25660 STEPHEN LANE	PARMA	ID	USA	83660	
PRESIDENT	LARRY STOR	RY	28283 HIGHWAY 18	PARMA	ID	USA	83660	
DIRECTOR	TRINITY JACKSON 26245 PIONEER LANE PARMA ID					USA	83660	
5. Organized Under the Laws of:		6. Annual Repo	rt must be signed.*					
ID		Signature: Mike Kelly			Date: 03/28/2018			
C 27163		Name (type	or print): Mike Kelly		Title: Treasurer			
Processed 03/28/2018 * Electronically provided signatures are accepted as original signatures.								