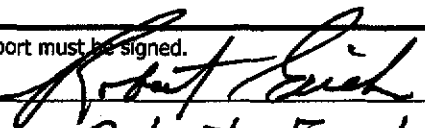


No. C 4735		Due no later than 7/31/2009 Annual Report Form		2. Registered Agent and Address (NO PO BOX)	
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. WEST SIDE LATERAL COMPANY, LIMITED ROBERT ERICKSON 6717 WHITLEY FRUITLAND ID 83619		GEORGE MCCLELLAND N. W. 1ST STREET FRUITLAND ID 83619	
				3. New 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
PRES	A. R. Henggeler	S. of City	Fruitland	Id	83619
D.R.	Geo. McClelland	N.W 1st	Fruitland	Id	83619
DIR	Mel Needs	N.W 1st	Fruitland	Id	83619
DIR	J.E. O'Leary	Hwy 95	Fruitland	Id	83619
Sec	Robert Erickson	6717 S Whitley	Fruitland	Id	83619
5. Organized Under the Laws of:		6. Annual Report must be signed.			
ID C 4735		Signature: 		Date: 5-15-09	
		Name(type or print): Robert Erickson		Title: Sec	