

| No. <b>C 30207</b>   |                  | <b>Due no later than Sep 30, 2010</b><br><b>Annual Report Form</b>   |       | 2. Registered Agent and Address ( <b>NO PO BOX</b> ) |         |  |  |
|--|------------------|--|-------|--|---------|--|--|
| Return to:<br><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>1. Mailing Address: Correct in this box if needed.</b><br><br>SEAMAN'S 2ND SUBDIVISION WATER USERS' ASSOCIATION,<br>INC.<br>V GAIL KRELLER<br>1707 COOLIDGE<br>BOISE ID 83704 |       | V GAIL KRELLER<br>1707 COOLIDGE<br>BOISE ID 83704    |         |  |  |
|  |                  |  |       |  |         | 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   | JIM KRELLER      | 1707 COOLIDGE  | BOISE | ID   | USA     | 83704                                      |  |
| DIRECTOR   | LAMOYNE WINGATE  | 1824 REGAL   | BOISE | ID   | USA     | 83704                                      |  |
| DIRECTOR   | PAT RUPE         | 8124 KING  | BOISE | ID   | USA     | 83704                                      |  |
| DIRECTOR   | JEANIE LOERA     | 8010 QUEEN   | BOISE | ID   | USA     | 83704                                      |  |
| TREASURER  | VALORA G KRELLER | 1707 COOLIDGE  | BOISE | ID   | USA     | 83704                                      |  |
| SECRETARY  | LAMOYNE WINGATE  | 1824 REGAL DR  | BOISE | ID   | USA     | 83704                                      |  |
| PRESIDENT  | TERRY WINGATE    | 1824 REGAL DR  | BOISE | ID   | USA     | 83704                                      |  |
| 5. Organized Under the Laws of:<br><br><b>ID</b><br><b>C 30207</b>   |                  | 6. Annual Report must be signed.*<br><br>Signature: Valora Kreller<br>Name (type or print): Valora Kreller   |       |  |         |  |  |
|  |                  | Date: 07/09/2010<br>Title: Treasurer   |       |  |         |  |  |
| Processed 07/09/2010 * Electronically provided signatures are accepted as original signatures.   |                  |  |       |  |         |  |  |