

No. C 42747		Due no later than Aug 31, 2009 Annual Report Form		2. Registered Agent and Address (NO PO BOX)		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. ROSWELL WATER USERS COOPERATIVE COMPANY MIKE KELLY 25660 STEPHEN LN PARMA ID 83660		MIKE KELLY 25660 STEPHEN LN PARMA ID 83660		
				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	GARY HICKMAN	P.O. BOX 441	PARMA	ID	USA	83660
DIRECTOR	NEDRA BENNETT	25927 STEPHEN LANE	PARMA	ID	USA	83660
DIRECTOR	NORM BOND	P.O. BOX 534	PARMA	ID	USA	83660
TREASURER	MIKE KELLY	25660 STEPHEN LANE	PARMA	ID	USA	83660
PRESIDENT	LARRY STORY	28283 HIGHWAY 18	PARMA	ID	USA	83660
5. Organized Under the Laws of: ID C 42747		6. Annual Report must be signed.* Signature: Mike Kelly Name (type or print): Mike Kelly Date: 08/16/2009 Title: Treasurer				
Processed 08/16/2009		* Electronically provided signatures are accepted as original signatures.				