

No. C 151500 Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	Due no later than October 31, 2006 Annual Report Form 1. Mailing Address - Correct in this box, if applicable CASCADE POWER & LIGHT, INC. DAVEN STORY 12491 LAKESHORE DR NAMPA, ID 83686	2. Registered Agent and Office NO PO BOX DAVEN STORY 12491 LAKESHORE DR NAMPA, ID 83686 3. New Registered Agent Signature																		
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px solid black;">Office held</th> <th style="text-align: left; border-bottom: 1px solid black;">Name</th> <th style="text-align: left; border-bottom: 1px solid black;">Street or P.O. Address</th> <th style="text-align: left; border-bottom: 1px solid black;">City</th> <th style="text-align: left; border-bottom: 1px solid black;">State</th> <th style="text-align: left; border-bottom: 1px solid black;">Zip</th> </tr> </thead> <tbody> <tr> <td style="vertical-align: top;">DAVENSTORY, PRES.</td> <td></td> <td>12491 Lakeshore Dr.</td> <td>Nampa</td> <td>ID</td> <td>83686</td> </tr> <tr> <td style="vertical-align: top;">AMY STORY, V. PRES</td> <td></td> <td>"</td> <td>"</td> <td>"</td> <td>"</td> </tr> </tbody> </table>			Office held	Name	Street or P.O. Address	City	State	Zip	DAVENSTORY, PRES.		12491 Lakeshore Dr.	Nampa	ID	83686	AMY STORY, V. PRES		"	"	"	"
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5. Organized Under the Laws of: IDAHO C 151500	6. Signature <u><i>Amy Story</i></u> Date <u>8/2/06</u> Name (Typed or Printed) <u>AMY STORY</u> Title <u>VICE PRES.</u>																			

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