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|--------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|----------------------------------------------------|---------|-------------|--|
| No. <b>C 115863</b>                                                                                                                                    |                 | <b>Due no later than Jul 31, 2015</b>                                                                                                                         |          | 2. Registered Agent and Address <b>(NO PO BOX)</b> |         |             |  |
| Return to:<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>VISTA ALEGRE WATER AND ROAD ASSOCIATION, INC.<br>ANDREA LOGAN<br>PO BOX 887<br>SHOSHONE ID 83352 |          | ANDREA LOGAN<br>369 N 120 E<br>SHOSHONE ID 83352   |         |             |  |
|                                                                                                                                                        |                 |                                                                                                                                                               |          | 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 |  |
| TREASURER                                                                                                                                              | DANNY R LOGAN   | PO BOX 887                                                                                                                                                    | SHOSHONE | ID                                                 | USA     | 83352       |  |
| SECRETARY                                                                                                                                              | ANDREA L LOGAN  | PO BOX 887                                                                                                                                                    | SHOSHONE | ID                                                 | USA     | 83352       |  |
| PRESIDENT                                                                                                                                              | MARK MASTROFINI | 410 N 120 E                                                                                                                                                   | SHOSHONE | ID                                                 | USA     | 83352       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>C 115863</b>                                                                                          |                 | 6. Annual Report must be signed.*<br>Signature: Andrea Logan<br>Name (type or print): Andrea Logan<br>Date: 07/31/2015<br>Title: Secretary                    |          |                                                    |         |             |  |
| Processed 07/31/2015                                                                                                                                   |                 | * Electronically provided signatures are accepted as original signatures.                                                                                     |          |                                                    |         |             |  |