

No. C 50119	Annual Report Form Due No Later Than November 30, 1996		2. Registered Agent and Office NOT A P.O. BOX																															
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED	1. Mailing Address - Please Correct, If Not Correct HOLIDAY ACRES WATER AND SEWE P O BOX 658		MARGE HUDDLESTON N 26150 RAMSEY RD ATHOL ID 83801																															
	* FIRST NOTICE * SPIRIT LAKE ID 83859		3. Organized Under the Laws of: ID C 50119																															
4. Corporations: Enter Names and Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one)																																		
<table style="width: 100%; border: none;"> <tr> <th style="text-align: left;"><u>Office held</u></th> <th style="text-align: left;"><u>Name</u></th> <th style="text-align: left;"><u>Street or P.O. Address</u></th> <th style="text-align: left;"><u>City</u></th> <th style="text-align: left;"><u>State</u></th> <th style="text-align: left;"><u>Zip</u></th> </tr> </table>					<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>																								
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5. NATURE OF BUSINESS COMMUNITY WATER SYSTEM		6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. Signature <u>Marge Huddleston</u> Date <u>9-26-96</u> Name (Typed or Printed) <u>MARGE HUDDLESTON</u> Title <u>PRESIDENT</u>																																

ISSUED: 07-05-1996

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