No. C 106888 Return to:		Due no later than Jul 31, 2011 Annual Report Form 1. Mailing Address: Correct in this box if needed. CARON PUMP WATER SYSTEMS, INC. STEVE CARON PO BOX 909 EAGLE ID 83616		2. Registered Agent and Address (NO PO BOX) STEVE R CARON 11026 CULDESAC WAY BOISE ID 83714 3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080							
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Corporations: Enter N	Names and Busin	ess Addresses of President, Secreta	ry, and Directors. Treasurer	(optional).			
Office Held	Name	Street or	PO Address	City	State	Country	Postal Code
DIRECTOR STEVE R CARON		ARON 11026 CU	LDESAC WAY	BOISE	ID	USA	83703
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID		Signature: Steve Caron		Date: 08/19/2011			
C 106888		Name (type or print): Steve Caron		Title: Director			
Processed 08/19/2011 * Electronically provided signatures are accepted as original signatures.							