

No. C 181749		Due no later than Jan 31, 2010		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		Annual Report Form 1. Mailing Address: Correct in this box if needed. LAKE PEND OREILLE WATERKEEPER, INC JENNIFER EKSTROM 523 ERIE ST SANDPOINT ID 83864		JENNIFER EKSTROM 523 ERIE ST SANDPOINT ID 83864			
				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	STEVE HOLT	6162 EUREKA RD	SAGLE	ID	USA	83860	
DIRECTOR	CHRIS HECHT	PO BOX 369	SAGLE	ID	USA	83864	
DIRECTOR	DAVE HUSSEY	75 CROOKED EAR CT	SANDPOINT	ID	USA	83864	
5. Organized Under the Laws of: ID C 181749		6. Annual Report must be signed.* Signature: Andrew Platte Name (type or print): Andrew Platte Date: 01/08/2010 Title: Cpa					
Processed 01/08/2010		* Electronically provided signatures are accepted as original signatures.					