

No. C 137300		Due no later than Jan 31, 2010 Annual Report Form		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		1. Mailing Address: Correct in this box if needed. IDAHO ADVENTURES, INC. MARK TROY PO BOX 834 SALMON ID 83467		MARK TROY NO 6 ADVENTURE LN SALMON ID 83467			
						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	KRISTIN TROY	PO BOX 834	SALMON	ID	USA	83467	
PRESIDENT	MARK TROY	PO BOX 834	SALMON	ID	USA	83467	
5. Organized Under the Laws of: ID C 137300		6. Annual Report must be signed.* Signature: Kristin Troy Name (type or print): Kristin Troy					
		Date: 03/20/2010 Title: Treasurer					
Processed 03/20/2010		* Electronically provided signatures are accepted as original signatures.					