No. C 123595		Due no later than Apr 30, 2010			2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. SNAKE RIVER 4X4, INC. THOMAS L HOWELL 4275 E 1400 N ASHTON ID 83420		42 AS	THOMAS L HOWELL 4275 E 1400 N ASHTON ID 83420 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE 4. Corporations: Enter Names and Busine		ness Addresses of President, Secretary, and Directors. Treasurer (optional).						
	Name	C33 / (CC) C3 C1 1 1 C3	Street or PO Address	City	-	State	Country	Postal Code
DIRECTOR JASON T. HOWELL DIRECTOR KARLA M HOWELL		1407 STATE HIWAY 47 4275 E. 1400 N.	100000000000000000000000000000000000000	ITON ITON,	ID ID	USA USA	83420-5405 83420-5405	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 123595		Signature: Thomas L. Howell Name (type or print): Thomas L. Howell			Date: 02/21/2010 Title: President			
Processed 02/21/2010 * Electronically provided signatures are accepted as original signatures.								