

No. W 10050		Due no later than Oct 31, 2011 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		1. Mailing Address: Correct in this box if needed. HIGH MOUNTAIN ADVENTURES LLC SCOTT P ESKELSON 425 S HOLMES IDAHO FALLS ID 83401		SCOTT P ESKELSON 425 SOUTH HOLMES AVENUE IDAHO FALLS ID 83401			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MANAGER	Name KRIS WRIGHT	Street or PO Address 1355 E LINCOLN RD		City IDAHO FALLS	State ID	Country USA	Postal Code 83401
5. Organized Under the Laws of: ID W 10050		6. Annual Report must be signed.* Signature: Scott P. Eskelson Name (type or print): Scott P. Eskelson Date: 08/12/2011 Title: Registered Agent					
Processed 08/12/2011 * Electronically provided signatures are accepted as original signatures.							