




No. W 23192	Due no later than Mar 31, 2012 Annual Report Form	2. Registered Agent and Office (NOT A P.O. BOX) MICHAEL WURTZ 1468 S MAIN ST PO BOX 537 CASCADE ID 83611
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. HIGH MOUNTAIN STORAGE-CASCADE LLC PO BOX 537 CASCADE ID 83611	3. New Registered Agent Signature.

4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.

Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code
Manager <input checked="" type="checkbox"/> Member <input checked="" type="checkbox"/>	DENISE WURTZ	1468 S MAIN ST	CASCADE	ID	VALLEY	537
Manager <input checked="" type="checkbox"/> Member <input checked="" type="checkbox"/>	MICHAEL D. WURTZ	1468 S MAIN ST	CASCADE	ID	VALLEY	537
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager <input type="checkbox"/> Member <input type="checkbox"/>						

5. Organized Under the Laws of: <div style="text-align: center; font-weight: bold;">IDAHO W 23192</div>	6. <table style="width: 100%;"> <tr> <td style="width: 70%;">Signature: </td> <td style="width: 30%;">Date: 4-1-12</td> </tr> <tr> <td>Name (type or print): MICHAEL D. WURTZ</td> <td>Title: Owner</td> </tr> </table>	Signature: 	Date: 4-1-12	Name (type or print): MICHAEL D. WURTZ	Title: Owner
Signature: 	Date: 4-1-12				
Name (type or print): MICHAEL D. WURTZ	Title: Owner				

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