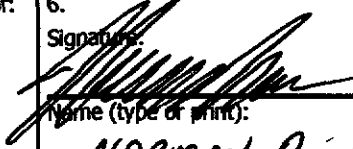


No. C 185249	Reinstatement Annual Report Form ADMIN DISSOLVED 02/08/2011		2. Registered Agent and Office (NOT A P.O. BOX) LEONARD S SCHULTE CPA 6913 MAIN ST BONNERS FERRY ID 83805
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. ALPINE ELK RANCH INC LEONARD S SCHULTE CPA 6013 MAIN ST BONNERS FERRY ID 83805 141 PARR Rd Priest River ID 83856		3. <u>New</u> Registered Agent Signature.
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors and (optional) Treasurer.			
Office Held	Name	Street or PO Address	City State Country Postal Code
President	NORMAN BROWNE	141 Parr Rd	Priest River ID USA 83856
Director	JARED N. BROWNE	141 PARR Rd	Priest River ID USA 83856
Director	JUSTIN D. BROWNE	141 PARR Rd	Priest River ID USA 83856
5. Organized Under the Laws of: IDAHO C 185249		6. Signature:  Name (type or print): <u>NORMAN D. BROWNE</u> Date: <u>8-4-12</u> Title: <u>President</u>	
Issued 08/01/2012 by PEH			

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM