

No. W 58950		Due no later than Feb 28, 2011		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		Annual Report Form		GARY SORENSON 31 E MAIN ST WEISER ID 83672			
		1. Mailing Address: Correct in this box if needed.		3. <u>New</u> Registered Agent Signature:*			
		BASE CAMP LEGENDS LLC. GARY SORENSON 31 E MAIN ST WEISER ID 83672					
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MANAGER	GARY SORENSON	31 E MAIN ST	WEISER	ID	USA	83672	
MANAGER	TOM SORENSON	31 E MAIN ST	WEISER	ID	USA	83672	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 58950		Signature: Gary Sorenson			Date: 12/09/2010		
		Name (type or print): Gary Sorenson			Title: Member - Manager		
Processed 12/09/2010		* Electronically provided signatures are accepted as original signatures.					