No. <b>W 10050</b>		Due no later than Oct 31, 2008	2. Registered Agent and Address (NO PO BOX)  SCOTT P ESKELSON 425 SOUTH HOLMES AVENUE IDAHO FALLS ID 83401  3. New Registered Agent Signature:*			
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.  HIGH MOUNTAIN ADVENTURES LLC  SCOTT P ESKELSON  425 S HOLMES  IDAHO FALLS ID 83401				
NO FILING FEE IF RECEIVED BY DUE DATE  4. Limited Liability Companies: Enter Nar		nes and Addresses of at least one Member or Manager.				
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
MANAGER KRIS WRIGH		IT 1355 E LINCOLN RD	IDAHO FALLS	ID	USA	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: 08/20/2008 Title: Registered Agent			
Processed 08/20/2008 * Electronically provided signatures are accepted as original signatures.						