REINSTATEMENT FILED EFFECTIVE

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No. C 120180	Annual Report Form ADMIN DISSOLVED 02/17/2000		ent and Office NO	
Return to: SECRETARY OF STATE	1. Mailing Address - Correct in this box, if applicable	ZOSELMST 1302 N ZZNOS		
450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	WATERMARK ADVENTURES, INC. BO-BOX766 1302 N ZZNJ ST. KETCHUM, ID 83340		E, ID-83919-	e, ID. B
FEE DUE \$30.00	Boise, ID 83702	3. <u>New</u> register	red agent signal	ture
Limited Liability Companies: Enter Limited and Limited Liability Part	Business Addresses of President, Secretary and Directors r Names and Addresses of management. nerships: Enter names and addresses of at least two (2) partners.	_L	Otata	
Office held Name President Patr	ick Harper 1302 H-224d st.	City Boise	State ID	83702
Office held Name			JD	
Officeneid Name President Patr			JEH JD	
Office held Name			ID 7/221	