

No. C 49067	Reinstatement Annual Report Form ADMIN DISSOLVED 06/08/2010		2. Registered Agent and Office (NOT A P.O. BOX) FRANCES B TONSMEIRE 21 TONSMEIRE RANCH RD SALMON ID 83467																												
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. WILDERNESS RIVER OUTFITTERS AND TRAIL EXPEDITIONS, INC. FRANCES TONSMEIRE PO BOX 72 LEMHI ID 83465		3. New Registered Agent Signature.																												
	4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors and (optional) Treasurer. <table border="1"><thead><tr><th>Office Held</th><th>Name</th><th>Street or PO Address</th><th>City</th><th>State</th><th>Country</th><th>Postal Code</th></tr></thead><tbody><tr><td>Pres.</td><td>FRANCIS Tonsmeire</td><td>Box 72</td><td>Lemhi</td><td>ID</td><td></td><td>83465</td></tr><tr><td>Sec.</td><td>Amy Tonsmeire</td><td>446 Broadway</td><td>Salmon</td><td>ID</td><td></td><td>83467</td></tr><tr><td>V. Pres</td><td>Seth Tonsmeire</td><td>Box 41</td><td>Lemhi</td><td>ID</td><td></td><td>83465</td></tr></tbody></table>				Office Held	Name	Street or PO Address	City	State	Country	Postal Code	Pres.	FRANCIS Tonsmeire	Box 72	Lemhi	ID		83465	Sec.	Amy Tonsmeire	446 Broadway	Salmon	ID		83467	V. Pres	Seth Tonsmeire	Box 41	Lemhi	ID	
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5. Organized Under the Laws of: IDAHO C 49067	6. <table border="1"><tr><td>Signature:</td><td></td><td>Date:</td><td>6/16/10</td></tr><tr><td>Name (type or print):</td><td>FRAN Tonsmeire</td><td>Title:</td><td>Pres</td></tr></table>				Signature:		Date:	6/16/10	Name (type or print):	FRAN Tonsmeire	Title:	Pres																			
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