

No. C 87340		Due no later than Aug 31, 2015 Annual Report Form		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		1. Mailing Address: Correct in this box if needed. SALMON RIVER TOURS CO. MICHAEL D MCLAIN P. O. BOX 7 NORTH FORK ID 83466		MICHAEL D MCLAIN 20 KATIE LN NORTH FORK ID 83466		
				3. <u>New</u> Registered Agent Signature:*		
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
DIRECTOR	LARRY WASIA	25 SO. 615 W	BLACKFOOT	ID	USA	83221
DIRECTOR	RENE JENSEN	1811 IMNAHA LN.	LEWISTON	ID	USA	83501
TREASURER	MICHAEL D. MCLAIN	PO BOX 7	NORTH FORK	ID	USA	83466
SECRETARY	MICHAEL D. MCLAIN	PO BOX 7	NORTH FORK	ID	USA	83466
PRESIDENT	DICK WASIA	54 N. 50 E.	BLACKFOOT	ID	USA	83221
DIRECTOR	CAL PERCY	3606 CROMWELL LN	BLACKFOOT	ID	USA	83221
5. Organized Under the Laws of: ID C 87340		6. Annual Report must be signed.* Signature: Michael D. McLain Name (type or print): Michael D. McLain		Date: 08/13/2015 Title: Secretary		
Processed 08/13/2015		* Electronically provided signatures are accepted as original signatures.				