
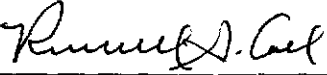


No. W 99628 Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	Reinstatement Annual Report Form ADMIN DISSOLVED 04/09/2012 1. Mailing Address: Correct in this box if needed. GAME TIME CONNECTIONS LLC 7148 N AARON ST COEUR D'ALENE ID 83815- 448 SUNTERRA DR. IDAHO FALLS, ID 83404	2. Registered Agent and Office (NOT A P.O. BOX) PACIFIC REGISTERED AGENTS INC 7148 N AARON ST COEUR D'ALENE ID 83815-USA RUSSELL G. CALL 448 SUNTERRA DR. IDAHO FALLS, ID 83404 3. New Registered Agent Signature. 																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Manager or Member</th> <th style="text-align: left;">Name</th> <th style="text-align: left;">Street or PO Address</th> <th style="text-align: left;">City</th> <th style="text-align: left;">State</th> <th style="text-align: left;">Country</th> <th style="text-align: left;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>RUSSELL CALL</td> <td>448 SUNTERRA DR</td> <td>IDAHO FALLS</td> <td>ID</td> <td>BOONEVILLE</td> <td>83404</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>			Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	RUSSELL CALL	448 SUNTERRA DR	IDAHO FALLS	ID	BOONEVILLE	83404	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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5. Organized Under the Laws of: <div style="text-align: center; font-weight: bold;">IDAHO W 99628</div>	6. Signature:  Date: 8-1-12 <hr/> Name (type or print): RUSSELL G. CALL <hr/> Title: OWNER <hr/>																																				

Issued 05/02/2012 by CLH

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM