

No. C 77608	Annual Report Form <i>Due No Later Than November 30,</i>		1997	2. Registered Agent and Office NOT A P.O. BOX STEVEN JONES Tom Long PT 1 BOX 117A HORSESHOE RE ID 83629																			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED * FIRST NOTICE *	1. Mailing Address Please Correct If Not Correct CASCADE RECREATION COMPANY, RT 1 BOX 117A HORSESHOE BEND ID 83629		3. Organized Under the Laws of ID C 77608																				
	4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one)																						
<table border="0" style="width: 100%;"> <thead> <tr> <th style="text-align: left;"><u>Office held</u></th> <th style="text-align: left;"><u>Name</u></th> <th style="text-align: left;"><u>Street or P.O. Address</u></th> <th style="text-align: left;"><u>City</u></th> <th style="text-align: left;"><u>State</u></th> <th style="text-align: left;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Tom Long</td> <td>Rt 1 Box 117A</td> <td>HSB</td> <td>ID</td> <td>83629</td> </tr> <tr> <td>Sec/Treas</td> <td>Deborah Long</td> <td>Rt 1 Box 117A</td> <td>HSB</td> <td>ID</td> <td>83629</td> </tr> </tbody> </table>						<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President	Tom Long	Rt 1 Box 117A	HSB	ID	83629	Sec/Treas	Deborah Long	Rt 1 Box 117A	HSB	ID	83629
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5.		6. <table border="0" style="width: 100%;"> <tr> <td style="width: 60%;"> Signature <u>Deborah Long</u> </td> <td style="width: 40%;"> Date <u>7/26/97</u> </td> </tr> <tr> <td> Name (Typed or Printed) <u>Deborah Long</u> </td> <td> Title <u>sec/treas</u> </td> </tr> </table>				Signature <u>Deborah Long</u>	Date <u>7/26/97</u>	Name (Typed or Printed) <u>Deborah Long</u>	Title <u>sec/treas</u>														
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ISSUED: 07-04-1997

↓ DO NOT TAPE OR STAPLE ↓

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