| No. <b>C 194671</b>  |                           | Due no later than May 31, 2015  | 2. Registered A   | 2. Registered Agent and Address (NO PO BOX) |             |                     |  |
|--|---------------------------|---|---|---|-------------|---------------------|--|
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080 |                           | Annual Report Form  1. Mailing Address: Correct in this box if needed.    |   | NANCY HALLOWELL<br>1043 N SOLDIER RD        |             |                     |  |
|  |                           | SOLDIER MOUNTAIN SKI AREA, INC. PO BOX 280 FAIRFIELD ID 83327             | FAIRFIELD ID 83327  3. New Registered Agent Signature:* |   |             |                     |  |
| NO FILING FEE IF<br>RECEIVED BY DUE DATE   |                           |   | or <u>rew</u> registe                                   | rea / igene of                              | igridiai ei |                     |  |
| 4. Corporations: Enter Na  | ames and Busine           | ess Addresses of President, Secretary, and Directors. Treasure            | er (optional).  |   |             |                     |  |
| Office Held  | Name                      | Street or PO Address  | City  | State                                       | Country     | Postal Code         |  |
| PRESIDENT<br>SECRETARY   | JIM JOHNSTO<br>WINSTON EL |   | BOISE<br>FAIRFIELD                                      | ID<br>ID                                    | USA<br>USA  | 83702<br>83327-0246 |  |
| 5. Organized Under the Laws of:  |                           | 6. Annual Report must be signed.*   |   |   |             |                     |  |
| ID<br>C 194671   |                           | Signature: Nancy Hallowell Date: 05/15/2015                               |   |   |             |                     |  |
|  |                           | Name (type or print): Nancy Hallowell                                     | Title: BOOKKEEPER                                       |   |             |                     |  |
| Processed 05/15/2015   |                           | * Electronically provided signatures are accepted as original signatures. |   |   |             |                     |  |