No. W 18129	Annual Report Form	Due no later than February 28, 2007 Annual Report Form		2. Registered Agent and Office NO PO BOX LISA R SMITH BATCHEN	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address - Correct in this box, if applicable DREAM CHASERS OUTDOOR ADVENTURE CLU PO BOX 921 VICTOR, ID 83455		164 N MAIN ST VICTOR, ID 83455 3. New Registered Agent Signature		
NO FILING FEE IF RECEIVED BY DUE DATE					
4. Limited Liability Compa	nies: Enter Names and Addresses	of Members.	•		
Office held Name	Street or P.O. Address	City	State	<u>Zip</u>	
Mermon Lisa & South Barri	We PoBox 921	Victor	10	83455	
Member Geraro Barcuran	POB0x 921	Victor	•	5345-5	
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5. Organized Under the Laws of: IDAHO	6. Signature	6. Signature		Date 12-12-36	
W 18129		\sim		Title Monter	
Issued 12/01/2006 Do Not Tape or Sta		Staple	2007	702005510	