

No. C 158106	Reinstatement Annual Report Form ADMIN DISSOLVED 04/11/2011		2. Registered Agent and Office (NOT A P.O. BOX) SANDRA CASTER 4402 E HOMEDALE RD CALDWELL ID 83607	
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. BLACKS CREEK GUIDE GEAR INC. SANDRA L CASTER 3515 ARTHUR ST CALDWELL ID 83605 USA		3. <u>New</u> Registered Agent Signature.	

4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors and (optional) Treasurer.						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
President	SANDRA CASTER	4402 E Homedale	Caldwell	ID	USA	83607

5. Organized Under the Laws of: IDAHO C 158106	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%;">Signature: <u><i>Sandra L Caster</i></u></td> <td style="width: 30%;">Date: <u>5/18/11</u></td> </tr> <tr> <td>Name (type or print): <u>SANDRA L CASTER</u></td> <td>Title: <u>President</u></td> </tr> </table>	Signature: <u><i>Sandra L Caster</i></u>	Date: <u>5/18/11</u>	Name (type or print): <u>SANDRA L CASTER</u>	Title: <u>President</u>
Signature: <u><i>Sandra L Caster</i></u>	Date: <u>5/18/11</u>				
Name (type or print): <u>SANDRA L CASTER</u>	Title: <u>President</u>				

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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Pay special attention to the mailing address. If the correct address is not given in Block 1, strike it out and write in the correct address.