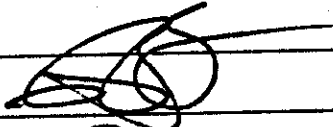


No. J 1032	Due no later than August 31, 2007 Annual Report Form	2. Registered Agent and Office NO PO BOX			
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable MOUNTAIN RECREATION, LLP 515 W PINE ST STE 1 SANDPOINT, ID 83864	BRENT BAKER 515 W PINE ST STE 1 SANDPOINT, ID 83864			
		3. New Registered Agent Signature			
4. Limited Liability Partnerships: Enter Names and Business Addresses of two (2) or more partners.					
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
	Partner B. Baker	515 Pine Street	Sandpoint ID		83864
	Partner R. Boyle	515 PINE STREET	SANDPOINT ID		83864
5. Organized Under the Laws of: IDAHO J 1032	6. Signature 		Date 8/14/07		
		Name (Typed or Printed) R. Boyle	Title PART.		

Issued 06/01/2007

Do Not Tape or Staple

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