

|                                                                                                                                                        |                |                                                                                                                                                                                         |              |                                                         |         |             |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|---------------------------------------------------------|---------|-------------|
| No. <b>C 105196</b>                                                                                                                                    |                | <b>Due no later than Feb 28, 2011</b>                                                                                                                                                   |              | 2. Registered Agent and Address <b>(NO PO BOX)</b>      |         |             |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                | <b>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>CARIBOU TRAIL RIDERS, INC.<br>ALAN WYLER<br>511 E HOOPER AVE<br>SODA SPRINGS ID 83276 |              | ALAN WYLER<br>511 E HOOPER AVE<br>SODA SPRINGS ID 83276 |         |             |
|                                                                                                                                                        |                |                                                                                                                                                                                         |              | 3. <u>New</u> Registered Agent Signature:*              |         |             |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).                                      |                |                                                                                                                                                                                         |              |                                                         |         |             |
| Office Held                                                                                                                                            | Name           | Street or PO Address                                                                                                                                                                    | City         | State                                                   | Country | Postal Code |
| DIRECTOR                                                                                                                                               | BRANDI CARROL  | 2001 PANTING LANE                                                                                                                                                                       | SODA SPRINGS | ID                                                      | USA     | 83276       |
| DIRECTOR                                                                                                                                               | ROSS CARROLL   | 2001 PANTING LANE                                                                                                                                                                       | SODA SPRINGS | ID                                                      | USA     | 83276       |
| DIRECTOR                                                                                                                                               | RUSTY HAYES    | 520 E 2 S                                                                                                                                                                               | SODA SPRINGS | ID                                                      | USA     | 83276       |
| TREASURER                                                                                                                                              | CARL TOUPIN    | 281 S 1 E                                                                                                                                                                               | SODA SPRINGS | ID                                                      | USA     | 83276       |
| SECRETARY                                                                                                                                              | BRENDA L WYLER | 511 EAST HOOPER AVE                                                                                                                                                                     | SODA SPRINGS | ID                                                      | USA     | 83276       |
| DIRECTOR                                                                                                                                               | DOW S BARKER   | 1754 CEDAR VIEW RD                                                                                                                                                                      | SODA SPRINGS | ID                                                      | USA     | 83276       |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>C 105196</b>                                                                                          |                | 6. Annual Report must be signed.*<br>Signature: Alan Wyler<br>Name (type or print): Alan Wyler<br>Date: 12/10/2010<br>Title: President                                                  |              |                                                         |         |             |
| Processed 12/10/2010                                                                                                                                   |                | * Electronically provided signatures are accepted as original signatures.                                                                                                               |              |                                                         |         |             |