

No. C 179445		Due no later than Jul 31, 2014		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form 1. Mailing Address: Correct in this box if needed. KINGFISHER RIVER TRIPS, INC. PAM KING 6466 WAPITI DRIVE LEWISTON ID 83501 USA		WILLIAM VERN MCCANN JR 1027 BRYDEN AVE LEWISTON ID 83501			
				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	
PRESIDENT	BRUCE J KING	6466 WAPITI DRIVE	LEWISTON	ID	USA	83501	
SECRETARY	PAMELA G KING	6466 WAPITI DRIVE	LEWISTON	ID	USA	83501	
5. Organized Under the Laws of: OR C 179445		6. Annual Report must be signed.* Signature: Pamela King Name (type or print): Pamela King					
		Date: 05/13/2014 Title: Secretary					
Processed 05/13/2014		* Electronically provided signatures are accepted as original signatures.					