

No. W 25930	Due no later than Sep 30, 2013 Annual Report Form		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	1. Mailing Address: Correct in this box if needed.		DIANE KRITZ 4030 RIVER RESORT DR HOMEDALE ID 83628			
	SNAKE RIVER R.V. RESORT, LLC. DIANE B KRITZ 415 VOLPI YSABEL RD PASO ROBLES CA 93446 USA		3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
MANAGER	DIANE KRITZ	4030 RIVER RESORT DR	HOMEDALE	ID	USA	83628
5. Organized Under the Laws of: ID W 25930		6. Annual Report must be signed.* Signature: Diane B Kritz Name (type or print): Diane B Kritz Date: 07/29/2013 Title: Manager				
Processed 07/29/2013		* Electronically provided signatures are accepted as original signatures.				