No. <b>W 66236</b>		Due no later than Aug 31, 2009		2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			CHRISTOPHER M SCHUEHLER			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  MOUNTAIN LEISURE, LLC CHRISTOPHER M SCHUEHLER 435 BUTLER LN		DRIGGS ID	435 BUTLER LN DRIGGS ID 83422			
		DRIGGS ID 83422		3. <u>New</u> Registe	3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
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 MANAGER			35 E BUTLER LANE 35 E BUTLER LANE	DRIGGS DRIGGS	ID ID	USA USA	83422 83422	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 66236		Signature: Christo		Date: 09/23/2009				
		Name (type or prir		Title: Manager				
Processed 09/23/2009 * Electronically provided signatures are accepted as original signatures.								