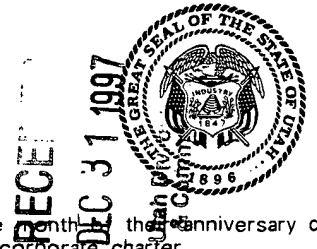


**Utah Department of Commerce
Division of Corporations & Commercial Code
160 East 300 South 2nd Floor, Box 146705
Salt Lake City, Utah 84114-6705
Phone (801) 530-4849**

Non-Profit Corporation Annual Report



Pursuant to Utah Law, all non-profit corporations must file their annual reports and corrections within the month of their anniversary date. Failure to do so will result in Delinquency, Suspension, then Revocation or Involuntary Dissolution of the corporate charter.

CORPORATION FILE # 163718 INCORPORATED OR QUALIFIED DATE 8 / 92 MONTH YEAR

1. CORPORATE NAME Great Western Trail Association, Inc.

2. REGISTERED AGENT Michael K. Browning NEW AGENT, MUST SIGN ABOVE

3. REGISTERED OFFICE ADDRESS 88 E. Mutton Hollow Rd

4. CITY, STATE & ZIP Kaysville, UT UTAH
REGISTERED AGENT MUST BE IN UTAH

WHEN CHANGING THE REGISTERED AGENT THE NEW AGENT MUST SIGN, BOTH AGENT & ADDRESS CHANGES REQUIRE A AUTHORIZED SIGNATURE ON LINE 14

5. INCORPORATED IN THE STATE AND UNDER THE LAWS OF UTAH

6. ADDRESS OF THE PRINCIPAL OFFICE IN THE HOME STATE. 88 E. Mutton Hollow Rd. Kaysville
(Street Address) (City)

UTAH 84037
(State or Country) (ZIP)

Optional officers may be listed in space provided below.

7. PRESIDENT Michael K. Browning
ADDRESS 88 E. Mutton Hollow Rd.
CITY Kaysville STATE UT ZIP 84037

8. VICE PRESIDENT Sheila W. Browning
ADDRESS 88 E. Mutton Hollow Rd
CITY Kaysville STATE UT ZIP 84037

9. SECRETARY Caroline Norton
ADDRESS 4405 W Sunrise Drive
CITY Park City STATE UT ZIP 84060

10. TREASURER Jacob W. Garn
ADDRESS 1889 Carriage Lane
CITY Kaysville STATE UT ZIP 84037

MINIMUM OF THREE MUST BE LISTED IN SPACE PROVIDED BELOW.

GOVERNING BOARD OF TRUSTEES

11. NAME Raymond B. Caldwell
ADDRESS 1054 N. 50 E.
CITY Kaysville STATE UT ZIP 84037

12. NAME Craig Norton
ADDRESS 4405 W. Sunrise Drive
CITY Park City STATE UT ZIP 84060

13. NAME Dwight Leroy Dennis
ADDRESS 2475 W. 300 N.
CITY PROVO STATE UT ZIP 84601

(Additional Officers or Governing Board of Trustees may be listed on the back of this form)

Under penalties of perjury and as an authorized officer, I declare that this annual report and, if applicable, the statement of change of registered office and/or agent, has been examined by me and is, to the best of my knowledge and belief, true, correct, and complete.

14. BY [Signature] MUST BE SIGNED BY A CORPORATE OFFICER OR TRUSTEE

15. President
(Title of Position)

16. Dec 29 19 97
(Date)

COMPLETE THIS FORM IN FULL.