

No. C 87009	Due no later than Jun 30, 2016 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. MAGNUSON HOSPITALITY GROUP, INC. H. JAMES MAGNUSON P. O. BOX 469 WALLACE ID 83873	H. JAMES MAGNUSON 1250 NORTHWOOD CENTER COURT STE A COEUR D'ALENE ID 83816				
		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	KATHLEEN J MAGNUSON SHEPPARD	1712 E 27TH AVENUE	SPOKANE	WA	USA	99203
DIRECTOR	H JAMES MAGNUSON	PO BOX 2288	COEUR D'ALENE	ID	USA	83816
DIRECTOR	JOHN F MAGNUSON	PO BOX 2350	COEUR D'ALENE	ID	USA	83816
DIRECTOR	KATHLEEN J MAGNUSON SHEPPARD	1712 E 27TH AVENUE	SPOKANE	WA	USA	99203
SECRETARY	DENNIS O'BRIEN	PO BOX 146	WALLACE	ID	USA	83873
5. Organized Under the Laws of: ID C 87009	6. Annual Report must be signed.* Signature: Dennis O'Brien Name (type or print): Dennis O'Brien		Date: 04/27/2016 Title: Secretary			
Processed 04/27/2016		* Electronically provided signatures are accepted as original signatures.				