No. W 18639	Due no later than March 31, 2006	2 Pariet 14
Return to:	Annual Report Form	2. Registered Agent and Office NO PO BOX
SECRETARY OF STATE	1. Mailing Address - Correct in this box, if applicable	ASHLEY THOMPSON
700 WEST JEFFERSON	ASHLEY INN, L.L.C.	
PO BOX 83720	PO BOX 1018	CASCADE, ID 83611
BOISE, ID 83720-0080	CASCADE, ID 83611	
NO FILING FEE IF		New Registered Agent Signature
RECEIVED BY DUE DATE		
4. Limited Liability Companie	s: Enter Names and Addresses of Members.	
Office held Name	•	
0.11	J. Audress	<u>City</u> <u>State</u> Zip
Owner Ashley	Thompson 620 N. MAIN St. (1) Thompson 620 N. MAIN St. (1)	1 sirode TD 83611
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owner fatrin	Mompson (020 N.VIIII ST. (A5Code ID 836/1
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5. Organized Under the Laws of:	6.	
5. Organized Under the Laws of: IDAHO		1
	Signature A sud ha Hol	Lui Date 1/25/06
IDAHO	Signature A sud ha Hol	Kin Title Bookens