No. W 783		Due no later than Jan 31, 2012		2. Registered Agent and Address (NO PO BOX)				
Return to:		Annual Report Form		DAVID L JOHNSON 1025 SOUTH BRIDGEWAY PLACE SUITE 270 EAGLE ID 83616				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. JOHNSON BROTHERS HOSPITALITY, L.L.C. DAVID L JOHNSON PO BOX 8506 BOISE ID 83707						
					3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		USA						
4. Limited Liability Comp	oanies: Enter Nai	mes and Address	es of at least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MANAGER	LARRY D JOHNSON		275 N 3RD E		MOUNTAIN HOMI	E ID	USA	83647
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 783		Signature: David L. Johnson			Date: 11/05/2011			
		Name (type or print): David L. Johnson			Title: Cfo			
Processed 11/05/2011 * Electronically provided signatures are accepted as original signatures.								