No. <b>L 2718</b>		Due no later than Mar 31, 2013		[2	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form  1. Mailing Address: Correct in this box if needed.  WARREN FAMILY LIMITED PARTNERSHIP (THE)  MARK T WARREN  575 RIVER PARKWAY  IDAHO FALLS ID 83402			MARK T WARREN 575 RIVER PARKWAY IDAHO FALLS ID 83402  3. New Registered Agent Signature:*			
				3				
NO FILING FEE IF RECEIVED BY DUE DATE			· · · ·					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
GENERAL PARTNER	WARREN HO	SPITALITY GROUP INC	575 RIVER PARKWAY		IDAHO FALLS	ID	USA	83402
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID L 2718		Signature: Mark T Warren			Date: 01/17/2013			
		Name (type or print): Mark T Warren			Title: President			
Processed 01/17/2013		* Electronically provided	l signatures are accepted as origina	al signa	tures.			