

No. W 56171		Due no later than Nov 30, 2012		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		Annual Report Form		DANIEL M JOHNSON 404 OAK ST NEZPERCE ID 83543			
		1. Mailing Address: Correct in this box if needed.		3. <u>New</u> Registered Agent Signature:*			
		NEZPERCE HOTEL LLC DAN JOHNSON PO BOX 36 NEZPERCE ID 83543					
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MEMBER	DANIEL M JOHNSON	PO BOX 36	NEZPERCE	ID	USA	83543-0036	
MANAGER	ANNA L JOHNSON	602 PINE ST	NEZPERCE	ID	USA	83543	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 56171		Signature: Daniel M Johnson				Date: 09/18/2012	
		Name (type or print): Daniel M Johnson				Title: Manager	
Processed 09/18/2012		* Electronically provided signatures are accepted as original signatures.					