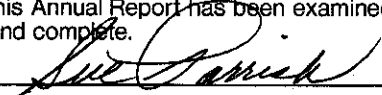


No. 042687 Return To Secretary of State Room 203, Statehouse Boise, ID 83720 RECEIVED SEC. OF STATE OCT 29 9 18 AM '87	Idaho Corporation Annual Report Form Due No Later Than November 1, 1987 1. Mailing Address — Please Correct 042687 EXECUTIVE INNS, INC. KENT J. PARRISH 4501 YELLOWSTONE POCATELLO IDAHO 83202	2. Registered Agent and Office KENT J. PARRISH 4501 YELLOWSTONE POCATELLO, IDAHO 83201 83202 3. Incorporated Under The Laws of STATE OF IDAHO OCT 29 1987																																				
4. Names and Addresses of Officers and Directors <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;"></th> <th style="width: 30%; text-align: center;"><u>Name</u></th> <th style="width: 30%; text-align: center;"><u>Street or P.O. Address</u></th> <th style="width: 10%; text-align: center;"><u>City</u></th> <th style="width: 10%; text-align: center;"><u>State</u></th> <th style="width: 10%; text-align: center;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President:</td> <td>Kent J. Parrish</td> <td>4501 Yellowstone</td> <td>Pocatello</td> <td>ID</td> <td>83202</td> </tr> <tr> <td>Secretary:</td> <td>Sue Parrish</td> <td>249 Parrish Dr.</td> <td>Pocatello</td> <td>ID</td> <td>83202</td> </tr> <tr> <td>Directors:</td> <td>Jan P. Frew, V.P.</td> <td>1825 Sunrise</td> <td>Pocatello</td> <td>ID</td> <td>83201</td> </tr> <tr> <td></td> <td>Bart J. Parrish</td> <td>229 Parrish Dr.</td> <td>Pocatello</td> <td>ID</td> <td>83202</td> </tr> <tr> <td></td> <td>Rodney J. Parrish</td> <td>4537 Yellowstone</td> <td>Pocatello</td> <td>ID</td> <td>83202</td> </tr> </tbody> </table>				<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President:	Kent J. Parrish	4501 Yellowstone	Pocatello	ID	83202	Secretary:	Sue Parrish	249 Parrish Dr.	Pocatello	ID	83202	Directors:	Jan P. Frew, V.P.	1825 Sunrise	Pocatello	ID	83201		Bart J. Parrish	229 Parrish Dr.	Pocatello	ID	83202		Rodney J. Parrish	4537 Yellowstone	Pocatello	ID	83202
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5. Nature of Business Rental Lodging Motel/Apartments	6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. Signature  Name (Typed or Printed) Date 10/21/87 Title																																					