	Annual Report Form	2. Registered Agent and Office NO PO BOX
Return to: SECRETARY OF STATE	1. Mailing Address - Correct in this box, if applicable	
700 WEST JEFFERSON	CASCADE HOTEL PROPERTY, L.L.C. PO BOX 1018 CASCADE, ID 83611	CASCADE, ID 83611
NO FILING FEE IF		3. New Registered Agent Signature
RECEIVED BY DUE DATE		
	: Enter Names and Addresses of Members.	
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5. Organized Under the Laws of:	6. 11/1	
	6. Signature Such h. Holy	uni Date 1/25/06
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