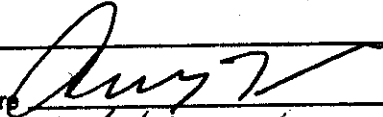


No. W 18639 Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	Due no later than March 31, 2007 Annual Report Form 1. Mailing Address - Correct in this box, if applicable ASHLEY INN, L.L.C. PO BOX 1018 CASCADE, ID 83611	2. Registered Agent and Office NO PO BOX ASHLEY THOMPSON 620 N MAIN ST CASCADE, ID 83611 3. <u>New</u> Registered Agent Signature																		
4. Limited Liability Companies: Enter Names and Addresses of Members. <table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td></td> <td>member Ashley Thompson</td> <td>P.O. Box 1018</td> <td>CASCADE</td> <td>ID</td> <td>83611</td> </tr> <tr> <td></td> <td>member Katrina Thompson</td> <td>P.O. Box 1018</td> <td>CASCADE</td> <td>ID</td> <td>83611</td> </tr> </tbody> </table>			Office held	Name	Street or P.O. Address	City	State	Zip		member Ashley Thompson	P.O. Box 1018	CASCADE	ID	83611		member Katrina Thompson	P.O. Box 1018	CASCADE	ID	83611
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5. Organized Under the Laws of: IDAHO W 18639	6. Signature  Name (Typed or Printed) <u>Ashley Thompson</u> Date <u>1/10/07</u> Title <u>member</u>																			

Issued 01/02/2007

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