| No. **W 34425** | **Due no later than Nov 30, 2016** | 2. Registered Agent and Address **(NO PO BOX)** |
|---|---|---|
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br>**NO FILING FEE IF RECEIVED BY DUE DATE** | **Annual Report Form**<br>**1. Mailing Address: Correct in this box if needed.**<br>FIVE STAR HOSPITALITY, LLC<br>SHELLEY C. WILLIAMS<br>718 E SHERMAN AVE<br>COEUR D ALENE ID 83814<br>USA | ARTHUR F WILLIAMS<br>718 E SHERMAN AVE<br>COEUR D'ALENE ID 83814<br><br>3. New Registered Agent Signature:* |

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 | SHELLEY CELESTE WILLIAMS | 718 E. SHERMAN AVENUE | COEUR D'ALENE | ID | USA | 83814 |
| MEMBER | ART FRANCIS WILLIAMS | 718 E. SHERMAN AVENUE | COEUR D'ALENE | ID | USA | 83814 |

| 5. Organized Under the Laws of: | 6. Annual Report must be signed.* | |
|---|---|---|
| **ID**<br>**W 34425** | Signature: Shelley C. Williams | Date: 11/08/2016 |
| | Name (type or print): Shelley C. Williams | Title: Member |

Processed 11/08/2016

* Electronically provided signatures are accepted as original signatures.