No. <b>C 42687</b>		Due no later than Aug 31, 2015		2. Registered Age	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		SUE PARRISH	to any specific and control of the c			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.			249 PARRISH DR. POCATELLO ID 83202			
		EXECUTIVE INNS, INC. SUE PARRISH 249 PARRISH LN POCATELLO ID 83202			3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		100,772220 10 002	02		3			
4. Corporations: Enter Na	mes and Busin	ess Addresses of Preside	nt, Secretary, and Directors. Treasu	ırer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR DIRECTOR	KENDRA P BURTON LYNNE P FOSTER		2232 E. TOMPKINS 160 PARRISH LN	SALT LAKE CITY CHUBBUCK	ID TT	USA USA	84121 83202	
DIRECTOR PRESIDENT	JAN P FREV SUE PARRIS		13327 W. BLUEBONNET 249 PARRISH LN.	BOISE CHUBBUCK	ID ID	USA USA	83713 83202	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Sue Parrish		Da	Date: 10/17/2015			
C 42687		Name (type or print): Sue Parrish		Ti	Title: President			
Processed 10/17/2015	_	* Electronically provided	signatures are accepted as original	signatures.	•	•	•	