No. C 90089		Due no later than Aug 31, 2009		2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			JEFFREY W MARTIN			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. MOSCOW HEALTH CARE, INC. JEFFREY W MARTIN 700 S MAIN ST MOSCOW ID 83843		MOSCOW II	700 S MAIN ST MOSCOW ID 83843 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).								
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
PRESIDENT JEFF W MAI		RTIN	700 S MAIN ST	MOSCOW	ID	USA	83843	
SECRETARY KARA BESST			700 S MAIN ST	MOSCOW	ID	USA	83843	
DIRECTOR B J SWANSO		ON	600 S. JACKSON	MOSCOW	ID	USA	83843	
DIRECTOR DEENA RAUC		CH	700 S MAIN ST	MOSCOW	ID	USA	83843	
DIRECTOR	JANIE NIRK		1010 S. BRINKEN	POTLATCH	ID	USA	83855	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Jeffrey W. Martin		Da	Date: 09/23/2009			
C 90089		Name (type or print): Jeffrey W. Martin		Ti	Title: President & CEO			
Processed 09/23/2009 * Electronically provided signatures are accepted as original signatures.								