

No. <b>W 22007</b>	<b>Due no later than December 31, 2003</b> <b>Annual Report Form</b>			2. Registered Agent and Office <b>NO PO BOX</b>		
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address - Correct in this box if applicable  PINNACLE HEALTH CARE CONSULTANTS, P JAMES F MAGUIRE 2725 CHANNING WAY			RYAN L PETERSON 2725 CHANNING WAY  IDAHO FALLS, ID 83404		
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	IDAHO FALLS, ID 83404			3. <u>New</u> Registered Agent Signature		
4. Limited Liability Companies: Enter Names and Addresses of Managers.						
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	
Member	James F. Maguire	3015 S. 2810 W.	Rebby	ID	83440	
Member	Troy R. Antfield	356 LaCosta Drive	Idaho Falls	ID	83402	
5. Organized Under the Laws of:			6. Signature _____			
IDAHO W 22007			Name (Typed or Printed) _____			
			Date <u>22 OCT 03</u>			
			Title _____			

Issued 10/01/2003

**Do Not Tape or Staple**