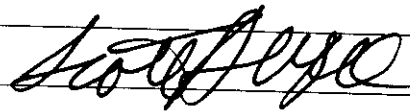


No. W 1164	Due no later than May 31, 2001 Annual Report Form		2. Registered Agent and Office NO PO BOX												
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable IDAHO PARTNERS IN CARE, LLC SCOTT BURPEE 820 ELM ST ST MARIES, ID 83861		SCOTT BURPEE 820 ELM ST ST MARIES, ID 83861 3. <u>New</u> Registered Agent Signature												
4. Limited Liability Companies: Enter Names and Addresses of Managers. <table border="1"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>Chief Executive Officer of Managing Member</td> <td>Scott Burpee</td> <td>820 Elm Street</td> <td>St. Maries, ID</td> <td></td> <td>83861</td> </tr> </tbody> </table>				<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	Chief Executive Officer of Managing Member	Scott Burpee	820 Elm Street	St. Maries, ID		83861
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>										
Chief Executive Officer of Managing Member	Scott Burpee	820 Elm Street	St. Maries, ID		83861										
5. Organized Under the Laws of: IDAHO W 1164		6. Signature  Date <u>3/14/01</u> Name (Typed or Printed) <u>Scott F. Burpee</u> Title: <u>CEO</u> XXXX													

Issued 03/01/2001

Do Not Tape or Staple

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