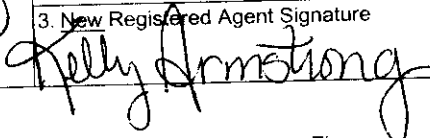
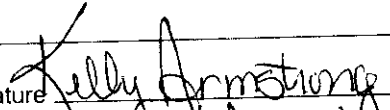
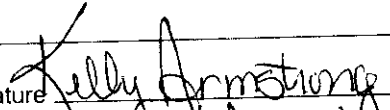
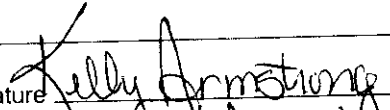


No. W 22611	Due no later than February 29, 2004 Annual Report Form		2. Registered Agent and Office NO PO BOX												
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable PALOUSE HEALTH PROPERTIES, L.L.C. 4115. Main (until 4/2004) 700 S MAIN ST 2300 W. "A" st. (after 4/2004) MOSCOW, ID 83843		KARA BESS Kelly Armstrong 700 S MAIN ST 4115, Main MOSCOW, ID 83843 3. New Registered Agent Signature 												
4. Limited Liability Companies: Enter Names and Addresses of Managers. <table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>Executive Director</td> <td>Kelly Armstrong</td> <td>Temporary until 4/2004 4115. Main Moscow, ID 83843</td> <td>(Permanent) After 4/2004 2300 W. "A" st. Moscow, ID 83843</td> <td></td> <td></td> </tr> </tbody> </table>				Office held	Name	Street or P.O. Address	City	State	Zip	Executive Director	Kelly Armstrong	Temporary until 4/2004 4115. Main Moscow, ID 83843	(Permanent) After 4/2004 2300 W. "A" st. Moscow, ID 83843		
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5. Organized Under the Laws of: IDAHO W 22611	6. <table border="1"> <tr> <td>Signature</td> <td></td> <td>Date</td> <td>1/15/04</td> </tr> <tr> <td>Name (Typed or Printed)</td> <td>Kelly Armstrong</td> <td>Title</td> <td>Executive Director</td> </tr> </table>			Signature		Date	1/15/04	Name (Typed or Printed)	Kelly Armstrong	Title	Executive Director				
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