


No. W 3288	Due no later than Dec 31, 2000 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		CHRISTOPHER CLOSE W 77-A COMMERCE DR													
	BACK 'N ACTION HOME MEDICAL EQUIPME CHRISTOPHER CLOSE W 77-A COMMERCE DR HAYDEN LAKE, ID 83835		HAYDEN LAKE, ID 83835 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>Manager</td> <td>Chris Close</td> <td>PO Box 2723</td> <td>HAYDEN</td> <td>ID</td> <td>83835</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>	Manager	Chris Close	PO Box 2723	HAYDEN	ID	83835
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>											
Manager	Chris Close	PO Box 2723	HAYDEN	ID	83835											
5. Organized Under the Laws of: IDAHO W 3288		6. Signature  Name (Typed or Printed) CHRIS CLOSE			Date 1-20-00 Title: manager											