

No. 0277	Idaho Corporation Annual Report Form Due No Later Than November 1, 1991	2. Registered Agent and Office NOT A P.O. BOX JOLENE TUMA 3811B ROAD 2700 E. TWIN FALLS ID 83301																								
Return To Secretary of State Room 203, Statehouse Boise, ID 83720 NO FEE REQUIRED	1. Mailing Address: <i>Please Correct If Not Correct</i> QUALITY CARE COUNTRY ESTATE JOLENE TUMA 3811B ROAD 2700 E. TWIN FALLS ID 83301	3. Incorporated Under The Laws of ID NO: 089277																								
4. Names and Addresses of Officers and Directors <table border="1"> <thead> <tr> <th></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>President:</td> <td>JOLENE L. TUMA</td> <td>511 Monte Vista Dr</td> <td>Twin Falls,</td> <td>ID</td> <td>83301</td> </tr> <tr> <td>Secretary:</td> <td>CHARLES R. TUMA</td> <td>511 Monte Vista Dr</td> <td>Twin Falls,</td> <td>ID</td> <td>83301</td> </tr> <tr> <td>Directors:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President:	JOLENE L. TUMA	511 Monte Vista Dr	Twin Falls,	ID	83301	Secretary:	CHARLES R. TUMA	511 Monte Vista Dr	Twin Falls,	ID	83301	Directors:					
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Directors:																										
5. Nature of Business <i>Residential Care</i> <i>Facilities</i>	6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. <table border="1"> <tr> <td>Signature</td> <td><i>Jolene L. Tuma</i></td> <td>Date</td> <td><i>7/20/91</i></td> </tr> <tr> <td>Name (Typed or Printed)</td> <td>JOLENE L. TUMA</td> <td>Title</td> <td><i>President</i></td> </tr> </table>		Signature	<i>Jolene L. Tuma</i>	Date	<i>7/20/91</i>	Name (Typed or Printed)	JOLENE L. TUMA	Title	<i>President</i>																
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