

No. 99662	Idaho Corporation Annual Report Form	2. Registered Agent and Office NOT A P.O. BOX
Return To	Due No Later Than November 1, 1993	WINSTON V. BEARD 683 N CAPITAL
Secretary of State Room 203, Statehouse Boise, ID 83720 * FIRST NOTICE * NO FEE REQUIRED	1. Mailing Address	IDAHO FALLS ID 83402
	IDAHO FALLS RECOVERY CENTER, IN WINSTON V. BEARD P O BOX 51718 AVE IDAHO FALLS ID 83402	3. Incorporated Under The Laws of ID NO: 99662

4. Names and Addresses of Officers and Directors

MUST BE PRINTED OR TYPED

	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President:	Annette Lee	1945 E. 17th Street	Idaho Falls	ID	83404
Secretary:	Winston V. Beard	P.O. Box 51718	Idaho Falls	ID	83405
Directors:	Rheim B. Jones	2035 E. 17th Street	Idaho Falls	ID	83404
	James A. Haney	1945 E. 17th Street	Idaho Falls	ID	83404
	William E. Armour	2001 S. Woodruff	Idaho Falls	ID	83404
	Vernon B. Beck	333 S. Woodruff	Idaho Falls	ID	83404
	Jackie Street	1945 E. 17th Street	Idaho Falls	ID	83404
	Craig Z. Hall	1660 John Adams Parkway	Idaho Falls	ID	83401
	Annette Lee				

5. Nature of Business

licensed hospital emphasizing
nursing care

6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.

Signature

Name

Winston V. Beard
(Typed or Printed) Winston V. Beard

Date

Title

8-2-57

Secretary