

No. C 70847		Due no later than Sep 30, 2007		2. Registered Agent and Address (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 needed. HOSPICE OF SALMON VALLEY, INC. SONJA ANDERSON 506 VAN DREFF ST SALMON ID 83467		FRANCES CRAWSHAW 506 VAN DREFF SALMON ID 83467			
				3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
DIRECTOR	SONJA ANDERSON	506 VAN DREFF	SALMON	ID	USA	83467	
5. Organized Under the Laws of: ID C 70847		6. Annual Report must be signed.* Signature: Sonja Anderson Name (type or print): Sonja Anderson Date: 10/10/2007 Title: Director					
Processed 10/10/2007		* Electronically provided signatures are accepted as original signatures.					