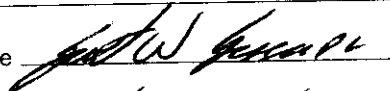


No. C 131980	Due no later than January 31, 2004 Annual Report Form	2. Registered Agent and Office NO PO BOX
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address - Correct in this box, if applicable MOUNTAIN HOME PHYSICAL THERAPY, P.C 245 N 3RD E MOUNTAIN HOME, ID 83647	SCOTT W SESSIONS 245 N 3RD E MOUNTAIN HOME, ID 83647
NO FILING FEE IF RECEIVED BY DUE DATE		3. <u>New</u> Registered Agent Signature

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

Office held	Name	Street or P.O. Address	City	State	Zip
President	Scott W Sessions	245 N. 3 rd E.	Mtn. Home	ID	83647
Secretary	Stephanie L. Sessions	245 N. 3 rd E.	Mtn. Home	ID	83647

5. Organized Under the Laws of: IDAHO C 131980	6. Signature <u></u> Date <u>11-13-03</u> Name (Typed or Printed) <u>SCOTT W SESSIONS</u> Title <u>President</u>
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