

FILED EFFECTIVE

REINSTATEMENT

No. **C 137810**

Return to:
**SECRETARY OF STATE
700 WEST JEFFERSON
PO BOX 83720
BOISE, ID 83720-0080**
FEE DUE \$30.00

Annual Report Form

ADMIN DISSOLVED 05/08/2003
1. Mailing Address - Correct in this box if applicable

**FIRST CHOICE HOSPICE ASSISTANCE, IN
PO BOX 1054
TWIN FALLS, ID 83301**

2. Registered Agent and Office **NOT A P.O. BOX**

**DEBRA L GATES MOGELSON
147 MAIN AVE EAST
TWIN FALLS, ID 83301**

3. New registered agent signature

4. Corporations: Enter Names and Business Addresses of **President, Secretary and Directors**
Limited Liability Companies: Enter Names and Addresses of **Managers** or **Members** (check one)

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
PRES/DIRECTOR	DEBRA GATES-MOGELSON	147 MAIN AVE. E.	TWIN FALLS,	ID	83301
SEC/DIRECTOR	DARLA R AIRIGH	147 MAIN AVE. E.	TWIN FALLS,	ID	83301
TREASURER	PEGGY WATLAND	147 MAIN AVE. E.	TWIN FALLS,	ID	83301

5. Organized under the laws of:
**IDAHO
C 137810**

6. Signature Barbara R Bacon Date 5-15-03

Name (Typed or Printed) BARBARA R BACON Title Comptroller

Issued 05/12/2003

Peggy Watland
Barbara R Bacon