No. W 76274	Due no later than Jul 31, 2012	2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to:	Annual Report Form		PENELOPE PARKER			
SECRETARY OF STATE	1. Mailing Address: Correct in this box if needed.	50 - CONTROL OF THE SECOND CONTROL OF THE SE	2034 ADDISON AVE E TWIN FALLS ID 83301			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	GOOD SAMARITANS LLC (THE) PENELOPE PARKER 2034 ADDISON AVE E	TWINTALLS	TWINTALLS ID 05301			
	TWIN FALLS ID 83301	3. <u>New</u> Register	3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE						
4. Limited Liability Companies: Enter Na	mes and Addresses of at least one Member or Manager.					
Office Held Name	Street or PO Address	City	State	Country	Postal Code	
MEMBER PENELOPE F	PARKER 2034 ADDISON AVE EAST	TWIN FALLS	ID	USA	83301-5306	
5. Organized Under the Laws of:	6. Annual Report must be signed.*					
ID	Signature: P. Parker	D	Date: 05/09/2012			
W 76274	Name (type or print): P. Parker	T	Title: Attorney			
Processed 05/09/2012	* Electronically provided signatures are accepted as original signatures.					