

No. C 118031

Due no later than January 31, 2005  
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

JOHNSON PHYSICAL THERAPY, P.A.  
CARL A JOHNSON  
285 W FRANCIS  
BLACKFOOT, ID 83221

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BLACKFOOT, ID 83221

**NO FILING FEE IF  
RECEIVED BY DUE DATE**

5112 LINDEE LANE  
Ammon ID 83401

3. New Registered Agent Signature

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

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
CEO	CARL JOHNSON	5112 LINDEE LANE	Ammon	ID	83401
SEC	JANA JOHNSON	5112 LINDEE LANE	Ammon	ID	83401

5. Organized Under the Laws of:

IDAHO  
C 118031

6.

Signature

(Typed or  
Printed)

Name

CARL JOHNSON

Date

11/8/04

Title

CEO