

<b>No. 82003</b>  Return To  <b>Secretary of State</b> <b>Room 203, Statehouse</b> <b>Boise ID 83720</b>  <b>REC'D</b> <b>SEC. OF STATE</b> <b>NO FEE REQUIRED</b> <b>89 OCT 23 AM 9 15</b>	<b>Idaho Corporation Annual Report Form</b>  <i>Due No Later Than November 1, 1989</i>  1. Mailing Address — <i>Please Correct</i> <b>82003</b> <b>REXBURG HEALTH CARE CORP..</b> <b>KENNETH L. MALLEA</b> <b>537 WEST BANNOCK, SUITE 215</b>  <b>BOISE ID 83702</b>	2. Registered Agent and Office <b>KENNETH L. MALLEA</b> <b>537 WEST BANNOCK, SUITE 215</b>  <b>BOISE ID 83702</b>  3. Incorporated Under The Laws of <b>IDAHO</b>  <b>NO: 82003</b>
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## 4. Names and Addresses of Officers and Directors

	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President:	<i>Ralph E. Hazelbaker</i>	<i>1810 Mackenzie Dr.</i>	<i>Columbus</i>	<i>OH</i>	<i>43220</i>
Secretary:	<i>Sharon A. Everett</i>	<i>1810 Mackenzie Dr.</i>	<i>Columbus</i>	<i>OH</i>	<i>43220</i>
Directors:	<i>Ralph E. Hazelbaker</i>	<i>1810 Mackenzie Dr.</i>	<i>Columbus</i>	<i>OH</i>	<i>43220</i>

## 5. Nature of Business

*Health Care*

6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.

Signature

Name (Typed or Printed)

*Sharon A. Everett*  
**SHARON A. EVERETT**

Date

Title

*10-20-89***SECRETARY**