

No. C 166809	Due no later than May 31, 2012 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. AT HOME PHYSICAL THERAPY P.C. ERICA L CHVILICEK 1459 W YAQUINA DR POST FALLS ID 83854		ERICA CHRILICEK 1459 W YAQUINA DR POST FALLS ID 83854			
			3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
TREASURER	ERICA L CHVILICEK	1459 W YAQUINA DR	POST FALLS	ID	USA	83854
PRESIDENT	BRETT J BARNA	1459 WEST YAQUINA DRIVE	POST FALLS	ID	USA	83854
5. Organized Under the Laws of: ID C 166809	6. Annual Report must be signed.* Signature: Erica Chvilicek Name (type or print): Erica Chvilicek		Date: 04/15/2012 Title: Treasurer			
Processed 04/15/2012		* Electronically provided signatures are accepted as original signatures.				