

| <b>No. C 98949</b>   | <b>Due no later than Jun 30, 2002</b><br><b>Annual Report Form</b>             |  | 2. Registered Agent and Office <b>NO PO BOX</b>                    |       |             |      |                        |      |       |     |           |                   |                         |       |    |       |                |                  |                         |       |    |       |
|--|--|--|--|-------|-------------|------|------------------------|------|-------|-----|-----------|-------------------|-------------------------|-------|----|-------|----------------|------------------|-------------------------|-------|----|-------|
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>         RECEIVED BY DUE DATE</b>  | 1. Mailing Address - Correct in this box, if applicable                        |  | RICHARD FULLILOVE<br>4380 W BEACON LIGHT RD<br><br>EAGLE, ID 83616 |       |             |      |                        |      |       |     |           |                   |                         |       |    |       |                |                  |                         |       |    |       |
|  | HUMAN HEALTH SERVICES, INC.<br><br>4380 BEACON LIGHT RD<br><br>EAGLE, ID 83616 |  |  |       |             |      |                        |      |       |     |           |                   |                         |       |    |       |                |                  |                         |       |    |       |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center;">Office held</th> <th style="text-align: center;">Name</th> <th style="text-align: center;">Street or P.O. Address</th> <th style="text-align: center;">City</th> <th style="text-align: center;">State</th> <th style="text-align: center;">Zip</th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Richard Fullilove</td> <td>4380 W. Beacon Light Rd</td> <td>Eagle</td> <td>ID</td> <td>83616</td> </tr> <tr> <td>Vice President</td> <td>Cheryl Fullilove</td> <td>4380 W. Beacon Light Rd</td> <td>Eagle</td> <td>ID</td> <td>83616</td> </tr> </tbody> </table> |  |  |  |       | Office held | Name | Street or P.O. Address | City | State | Zip | President | Richard Fullilove | 4380 W. Beacon Light Rd | Eagle | ID | 83616 | Vice President | Cheryl Fullilove | 4380 W. Beacon Light Rd | Eagle | ID | 83616 |
| Office held  | Name   | Street or P.O. Address   | City   | State | Zip         |      |                        |      |       |     |           |                   |                         |       |    |       |                |                  |                         |       |    |       |
| President  | Richard Fullilove  | 4380 W. Beacon Light Rd  | Eagle  | ID    | 83616       |      |                        |      |       |     |           |                   |                         |       |    |       |                |                  |                         |       |    |       |
| Vice President   | Cheryl Fullilove   | 4380 W. Beacon Light Rd  | Eagle  | ID    | 83616       |      |                        |      |       |     |           |                   |                         |       |    |       |                |                  |                         |       |    |       |
| 5. Organized Under the Laws of:<br><br>IDAHO<br>C 98949  |  | 6. Signature <u>Richard Fullilove</u> Date <u>4-13-02</u><br>Name (Typed or Printed) <u>Richard Fullilove</u> Title <u>President</u> |  |       |             |      |                        |      |       |     |           |                   |                         |       |    |       |                |                  |                         |       |    |       |