

No. C 79102	Annual Report Form <i>Due No Later Than November 30,</i>	1997	2 Registered Agent and Office NOT A P.O. BOX WILLIAM R. HULL 607 UNIVERSITY DRIVE POCATELLO ID 83201
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED * FIRST NOTICE *	1 Mailing Address Please Correct, If Not Correct REHAB MANAGEMENT, INC. WILLIAM R. HULL, DPT 333 N. 18TH, BOISE, ID 83720 607 University Dr POCATELLO ID 83201		3. Organized Under the Laws of ID C 79102
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of ☐ Managers or ☐ Members (check one)			
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u> <u>State</u> <u>Zip</u>
None			
President	<i>William R Hull</i>	<i>607 University Dr</i>	<i>Pocatello Idaho 83201</i>
Secretary	<i>Jean R Hull</i>	<i>607 University Dr</i>	<i>Pocatello Idaho 83201</i>
5.			
6.		Signature <u><i>William R Hull</i></u> Date <u><i>July 16, 1997</i></u> Name (Typed or Printed) <u><i>William R Hull</i></u> Title <u><i>President</i></u>	

ISSUED: 07-04-1997

↓ DO NOT TAPE OR STAPLE ↓

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