

No. <b>C 174044</b>		<b>Due no later than Jul 31, 2008</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>Annual Report Form</b>  <b>1. Mailing Address: Correct in this box if needed.</b>  SAINT ALPHONSUS EXPRESS CARE, INC. STEPHANIE WESTERMEIER 1055 N CURTIS RD BOISE ID 83706		STEPHANIE WESTERMEIER 1055 N CURTIS RD BOISE ID 83706			
				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	
DIRECTOR	SANDRA BENNETT BRUCE	1055 N CURTIS RD	BOISE	ID	USA	83706	
PRESIDENT	JANELLE REILLY	1055 N CURTIS RD	BOISE	ID	USA	83706	
SECRETARY	J ROBERT POLK MD	1055 N CURTIS RD	BOISE	ID	USA	83706	
5. Organized Under the Laws of:  <b>ID C 174044</b>		6. Annual Report must be signed.* Signature: Janelle Reilly Name (type or print): Janelle Reilly Date: 05/27/2008 Title: President/Director					
Processed 05/27/2008		* Electronically provided signatures are accepted as original signatures.					